

**Committee of Senior Representatives (CSR)
Twentieth Meeting
Helsinki-Vantaa, Finland
19-20 April 2012**

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| Title | Minutes from the 20 th Meeting of the NDPHS Committee of Senior Representatives |
| Submitted by | Secretariat |
| Summary / Note | This document outlines the main discussion points and decisions made during the 20 th meeting of the CSR |
| List of Annexes | Annex 1 – List of documents submitted to the meeting Annex 2 – List of participants |

1. Opening of the meeting and welcome

The meeting was opened and chaired by Ms. Liisa Ollila, the NDPHS CSR Chair.

Ms. Soili Mäkeläinen-Buhanist, Head of Unit at the Finnish Ministry for Foreign Affairs, welcomed the participants. In her opening remarks she thanked Russia for its dedicated work in chairing the Partnership during the preceding two years. Further, she stated, *inter alia*, that Finland had completed its national procedures necessary for the Agreement on the Establishment of the NDPHS Secretariat to enter into force and expressed a hope for a swift completion of procedures by the respective Partner Countries so that the agreement could come into force in the near future.

Further, she noted with appreciation the active role that the NDPHS played within the EU Strategy for the Baltic Sea Region as a sub-area coordinator for health and noted that the Northern Dimension structures provided a functioning format for implementation of the external aspects of the EUSBSR. She also mentioned that the interlink between the EUSBSR and the Strategy of social and economic development of the North-West Federal District of the Russian Federation could provide new opportunities for the NDPHS in the form of joint projects related to health and social well-being. In particular, she stressed the need to look for synergies in order to use available financing more effectively.

Further, Ms. Mäkeläinen-Buhanist recalled that the ND Ministerial meeting held in Oslo in November 2010 welcomed the decision of the EU to allocate funding for the Northern Dimension Partnerships in 2010-2013. A priority of Finland in this context was to secure funding for regional cooperation in the Baltic Sea Region and the Northern Dimension also in the next EU financial period. Finland was working hard towards this goal, since the EU funding was a key for further development of the Northern Dimension cooperation and sustainability of the cooperation, and she expressed a hope for support of other Partners in this regard. Finally, she wished the participants a good and fruitful meeting that would bring the NDPHS even further in its very important work.

2. Adoption of the agenda

The Meeting **adopted** the Provisional agenda with timetable (as submitted in document CSR 20/2/1).

3. Statements by the invited guests

Mr. Harry Ekestam of the Finnish Ministry of Employment and the Economy¹ informed about the ongoing preparations of the Baltic Sea Region Programme 2014-2020². He informed, *inter alia*, that it was hoped that the programme would be adopted by the end of 2013, so that first calls for proposals could be launched in 2014. It was expected that the total funding of the Baltic Sea Region Programme 2014-2020 would amount to 200 – 300 million EUR, which was more than during the current period. He also informed that the post-2013 programmes would need to support the implementation of the EU 2020 and the macro regional strategies and that the future cooperation programmes would be narrower in scope because of the thematic concentration proposed by the European Commission. Finally, while speaking about the NDPHS' efforts to ensure prioritization of health and social well-being in the next financial period, he mentioned that the future role of health in the revised EUSBSR Action Plan and the EUSBSR targets and indicators would be of utmost importance in this regard. Furthermore, he invited the NDPHS to contribute to the development of the Baltic Sea Region Programme for the funding period 2014-2020 and, as a first step, to fill out the questionnaire, sent to the NDPHS Secretariat on 17 April 2012, which aims at gathering expectations related to the scope and content, as well as other important aspects of the future programme.

The Secretariat expressed its appreciation to Mr. Ekestam for his informal input to drafting of the NDPHS position paper aimed to raise the profile of health and social well-being as well as his participation in and contribution to the EG Chairs and ITAs meeting held in February this year. Further, with reference to the letter from Baltic Sea Region Programme 2007-2013 Joint Technical Secretariat (disseminated in hard copy to the meeting participants), it proposed that the interested Partners and Participant, the NDPHS Expert and Task Groups, as well as the leaderships of the EUSBSR health-related projects would be invited to fill out the above mentioned questionnaire by 9 May 2012. The Secretariat would compile the contributions and, following approval by the CSR Chair, submit a consolidated filled-out questionnaire to the Baltic Sea Region Programme 2007-2013 Joint Technical Secretariat by 15 May 2012.

The Meeting took note of the information provided, **thanked** Mr. Harry Ekestam for his valuable advice. Further, it **decided** that, following the invitation, the NDPHS would contribute to the development of the Baltic Sea Region Programme 2014-2020 and, as the first step, would fill out and submit the questionnaire in accordance with the procedure proposed by the Secretariat.

¹ Mr. Harry Ekestam represents Finland in the Baltic Sea Region Programme 2007-2013 Monitoring Committee and in the Joint Programming Committee for the successor programme.

² Mr. Ekestam's ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

4. Information by the NDPHS Chairmanship and the NDPHS Secretariat

The Chair recalled, with regret, that, in her letter of 14 November 2011 (received on 9 December) Canada informed about its withdrawal from the NDPHS, effective immediately. Furthermore, she informed about the NDPHS' participation in and contribution to the First sub-regional technical consultation on the European Action Plan for Strengthening Public Health Capacities and Services held in Helsinki, Finland on 31 January – 1 February 2012. She invited Dr. Zaza Tsereteli, the ASA EG and PPHS EG ITA, to provide further details regarding the latter.

Dr. Zaza Tsereteli recalled that the NDPHS was invited to comment on the European Action Plan for Strengthening Public Health Capacities and Services and the Definitions of Essential Public Health Operations (EPHO) and services in Europe of the proposed Action Plan. He informed that the NDPHS was represented at two out of three consultation meetings organized by the WHO Euro and that the ASA EG and the HIV/AIDS&AI EG had submitted comments towards the action plan. The ITA of the ASA EG had also suggested including the actions on Social Determinants of Health into the list of EPHOs, which would be taken on board in the final version of the Action Plan, to be submitted to the 62nd session of the WHO Regional Committee for Europe. Finally, he thanked Finland for taking this initiative to participate in the discussions related to the preparation of European Action Plan for Strengthening Public Health Capacities and Services and noted that the NDPHS would be mentioned among organizations which had provided input to the discussions.

The Secretariat informed that on 17 April 2012 the Delegation of the European Union to Russia had informed it that the Delegation had received a prior approval to launch a direct award procedure aimed at concluding a direct award contract with the CBSS Secretariat, on behalf of the NDPHS Secretariat, amounting to up to 300,000 EUR. The Secretariat also informed that a 20% co-financing was required by the EU, and that the respective NDPHS groups had confirmed to it that they would be able to secure co-financing. Finally, it requested the CSR to authorize the CBSS Secretariat to engage, on behalf of the NDPHS Secretariat, into the Grant Agreement with the Delegation of the European Union to Russia. Once the NDPHS Secretariat would have its own legal capacity, the Agreement would be transferred from the CBSS Secretariat to the NDPHS Secretariat.

The Meeting took note of the presented information with appreciation and **authorized** the CBSS Secretariat to engage, on behalf of the NDPHS Secretariat, into the Grant Agreement with the Delegation of the European Union to Russia.

5. Information by the NDPHS Partners and Participant

With reference to documents CSR 20/5/Info 2 and CSR 20/5/Info 3, the European Commission informed about the ongoing review of the EUSBSR Action Plan and invited the NDPHS, in its capacity as the Priority Area Coordinator for the health component of the EUSBSR Action Plan, to contribute to the review process. In this context, it recommended to address health as a driver for increased prosperity.

In response to a question posed by Germany regarding the inclusion of health as a self-standing priority of the EUSBSR Action Plan, the European Commission stated that the Member States as the owners of the Strategy were defining its content,

therefore, the European Commission would follow the opinion of the EUSBSR Member States as agreed among them.

The BSSSC Secretariat informed about recent activities of the BSSSC and the BSSSC priorities during the Polish chairmanship. It mentioned, *inter alia*, that health and social well-being were among the priorities and that the regions had been encouraged to cooperate closely with the NDPHS, in particular regarding the project-related activities. It also referred to some challenges in engaging into cooperation, e.g., due to the fact that health was a national rather than a regional competence. Finally, it expressed its support to the views contained in the NDPHS position paper on raising the profile of health and social well-being.

Germany informed about the Baltic Sea Days to be held in Berlin, Germany, on 23-25 April 2012, among them the Northern Dimension Steering Group meeting to be attended by the NDPHS.

Norway congratulated Finland on assuming the Partnership's chairmanship and reaffirmed its support to the NDPHS, commitment to continue leading the ASA EG and providing part-time support to the PPHS EG. Norway also informed that it had provided approximately 62,000 EUR to the Russian – Norwegian component of the ADPY project through the NDPHS Project Pipeline.

Norway, in its capacity as the Norwegian Presidency of the NCM, informed that the NCM had provided approximately 33,000 EUR to the project "Healthier People: Management of change through monitoring and action," an NDPHS-labelled project, and that the NCM would take active part in the steering group of the project.

Norway, in its capacity as the Norwegian Chairmanship of the BEAC JWGHS, informed that Norway took over the chairmanship of the group together with the Republic of Karelia for the period of 2012-2013. It presented the results of the latest JWGHS meeting held in March 2012, which had the action plan for climate change in the BEAC region and development of the Barents TB programme among the main issues on the agenda. It also informed about the next meeting to be held in Petrozavodsk in autumn 2012, and that discussions were ongoing with the ASA EG regarding the inclusion on the agenda of issues of common interest.

Sweden expressed its continued support to the NDPHS and, in particular, the PPHS EG, the ADPY TG and the AMR TG that it was leading. Furthermore, it informed that it was chairing the Arctic Council until May 2013. Finally, it thanked the European Commission for expressing a view that health is a driver of prosperity, which was in line with the position that the Swedish Ministry of Health and Social Affairs was pursuing nationally.

The Meeting **took note** of the presented information.

6. Implementation of the NDPHS Strategy and the health sub-area of Priority Area 12 in the EUSBSR Action Plan

6.1 Progress and future steps toward implementing the NDPHS goals and mid-term operational targets

a) Goal 1: The role and working methods of the NDPHS are strengthened

The Secretariat informed about the progress in the implementation of Goal 1 and stated that, by and large, a good progress had been achieved. The NDPHS had made a good progress in: (i) increasing the visibility and wide recognition of the Partnership in the region (as demonstrated, e.g. by the invitations to the NDPHS to participate in the programming of the Baltic Sea Region Programme 2014-2020 and organize a panel discussion during the forthcoming EUSBSR 3rd Annual Forum); (ii) involving other regional stakeholders in the NDPHS-coordinated activities; (iii) development/facilitation of the regional flagship projects, and (iv) mobilisation of new sources of funding. Furthermore, recently initiated cooperation between the NDPHS and the European Social Fund Baltic Sea Network had a potential to achieve strengthened two-fold approach towards health and social well-being within the Partnership. On the other hand, further efforts were needed to include relevant international projects in the NDPHS Database for improved coordination.

Further, with reference to the European Commission's statement in agenda item 5, the Secretariat informed that the European Commission had requested the EUSBSR Priority Area Coordinators to provide comments and proposals regarding the organisation of the 3rd EUSBSR Annual Forum (to be held on 17-19 June 2012 in Copenhagen, Denmark) and the roles that the Priority Area Coordinators would like to assume in this regard. The issue was discussed during the 13th EG Chairs and ITAs meeting in February 2012, which had agreed to the proposal of the Secretariat that – considering that many other EUSBSR Priority Area Coordinators were interested in engaging Russian partners in their activities – the Partnership could bring added value to the Forum by presenting examples of successful cooperation with Russia in the implementation of the EUSBSR. To that end, it expressed appreciation to the Ministry of Health and Social Development of the Russian Federation for having had agreed to participate as a speaker during the Forum. In response to the NDPHS proposal DG REGIO invited it to co-organize a session during the Forum together with the City of Turku, which had put forth a similar proposal. To that end, the Secretariat asked the CSR to endorse the proposal that the Partnership would co-organize together with Turku a session on cooperation with Russia in the implementation of the EUSBSR.

Thematic area 1: Containing the spread of HIV/AIDS and tuberculosis

Goal 2: Prevention of HIV/AIDS and associated infections in the ND-area has improved; and Goal 3: Social and health care for HIV infected individuals in the ND area is integrated

The HIV/AIDS&AI EG Chair informed about the progress in the implementation of Goals 2 and 3³. He, *inter alia*, reminded about the worrying situation and trends in the region which required urgent action, such as increasing number of a combination of HIV and co-infections. He also informed that the HIV/AIDS&AI EG had been involved in approximately 40 completed projects and 14 ongoing projects, however, only a few new projects were under consideration, due to lack of funding, which was especially worrying because of the deteriorating HIV/AIDS&AI situation. Finally, he informed about the development of an internal Strategy and Action Plan for the HIV/AIDS&AI EG.

Goal 4: Resistance to antibiotics is mitigated in the ND area

³ Dr. Arsalo's ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

On behalf of the AMR TG, the PPHS EG Chair informed about the progress in the implementation of the Goal 4. She mentioned, *inter alia*, that the AMR TG aimed at embarking on a study on Extended Spectrum Beta-Lactamase (ESBL) resistance in surgical patients, which would cover all the NDPHS Partner Countries, however, the funding for the study had not been secured yet. A concept of the project had been submitted, through the NDPHS Secretariat, to the EU Delegation to Russia in December 2011 with an aim of securing a funding from the ENPI Regional East Indicative Programme 2010-2013.

Norway stated that it would host the next meeting of the AMR TG.

Thematic area 2: Accessibility and quality of primary health care

d) Goal 5: Inequality in access to qualified primary health care in the ND area is reduced

The PPHS EG ITA (Dr. Jurgutis) informed about the progress in the implementation of Goal 5⁴. He reported, *inter alia*, on: (i) the results of the ImPrim project; (ii) plans to develop a policy document “on Tomorrow’s Role of Primary Health Care Professionals in the Context of Changing Society Need” (funding will be sought from the ENPI Regional East Indicative Programme 2010-2013 with a joined application to be submitted by the Secretariat); and (iii) the progress in the development of transnational policy conclusions on best model solutions for local hospitals to support high quality primary care in the Baltic Sea Region. Regarding Operational target 5.4 and, in particular, a review of policies and practices for primary health care services for migrants, he mentioned that financial resources for survey had not been identified yet.

Thematic area 3: Prison health care policy and services

e) Goal 6: Health and other related needs of people kept in places of detention are readily met, access to the health services is improved, and gender specific needs are addressed

The PPHS EG ITA (Dr. Tsereteli) informed about the progress in the implementation of Goal 6⁵. In particular, he informed about the following project proposals which had been finalized, but funding for their implementation had not been secured yet: (i) Improving the system of medical and social measures aimed at creating adequate reproductive behaviour among women prisoners; (ii) Capacity Building, Knowledge Transfer and Best Practice in Working with Populations Most At Risk from Blood-Borne Virus Infections in Prison and Post-Prison Settings in Baltic and Nordic Countries; and (iii) Development of the effective model of preventive education and reintegration of young inmates in the Russian Federation.

Furthermore, he informed about the PPHS EG involvement in the development of the “Stewardship of Prison Health: Policy guidance for Member States of the WHO

⁴ Dr. Jurgutis’ ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

⁵ Dr. Tsereteli’s ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

European Region on the provision of health services in prisons” and main conclusions from this work.

In response to a question posed by Latvia, he informed that the above mentioned project proposals would be submitted for funding as soon as the PPHS EG had learnt about a relevant call for proposals. He asked the CSR members to assist in this matter and to forward the information of possible funding opportunities to the PPHS EG, when this kind of prospect will come to the knowledge of the CSR members.

Thematic area 4: Lifestyle-related non-communicable diseases and good social and work environments

f) Goal 7: The impact in the ND countries on society and individuals of hazardous and harmful use of alcohol and illicit drugs is reduced

g) Goal 8: Pricing, access to and advertising of alcoholic beverages is changed to direction, which supports the reduction of hazardous and harmful use of alcohol

h) Goal 9: Tobacco use and exposure to tobacco smoke is prevented and reduced in the ND area

On behalf of the ADPY Task Group the ASA EG ITA reported on Goal 7 and the TG's work on the Alcohol and drug prevention among youth project⁶. He informed, in particular, that the project had been divided into two smaller projects, which had already been developed, namely, “Setting the Scene - Indicators for Alcohol and Drug Prevention Policy” and the “Alcohol and Drug Prevention among Young People in BSR Communities - Situation Analysis for Evidence-based Policies (SEP)”. Regarding the former project, as mentioned in item 5 funding had been secured from Norway through the NDPHS Project Pipeline. Regarding the latter, funding will be sought from the ENPI Regional East Indicative Programme 2010-2013 with a joined application to be submitted by the Secretariat. He also informed that the next ADPY TG meeting would take place in Oslo, Norway.

In terms of progress towards Goal 8, the ASA EG ITA informed, *inter alia*, about the Thematic report on Alcohol Policies developed in late 2011, as well as about the development of an International Collaborative Research Project on Fetal Alcohol Spectrum Disorder. He also informed that the ASA EG had established a small working group, with the participation of representatives from Estonia, Poland, Russia and Norway to develop suggestions for possible policy advice for the NDPHS Partner Countries by the end of 2013.

i) Goal 10: The NDPHS Strategy on Health at Work is implemented in the ND area

The OSH TG Chair informed about the progress in the implementation of Goal 10⁷. He presented progress for the implementation of the individual components of the Strategy in the participating countries and remarked that, overall, good progress had been made. He also informed about the progress of the ILO N-W Project and the

⁶ Dr. Tsereteli's ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

⁷ Mr. Husberg's ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

FIOH N-W Project, as well as development of two new projects among the BSN members. He also mentioned that the OSH TG had volunteered to provide a number of articles to the NDPHS e-Newsletter.

In response to a request of Norway and a question posed by the Secretariat, he promised to disseminate the review report on the NDPHS Strategy on Health at Work and explained that the thematic report, based on a document-based survey, describing the organization, coverage, content and resources of OSH in NDPHS countries should be available in April.

j) Goal 11: Public health and social well-being among indigenous peoples in the ND area is improved

The NCD EG Chair, on behalf of the IMHAP TG, thanked the Partners for their support to the group thus far and recalled that the issue of the TG would be discussed in agenda item 6.6.

k) Goal 12: The impact of all main causes / risk-factors of lifestyle related NCDs in the ND countries are addressed (in addition to alcohol and tobacco targeted through Goals 7-9): overweight, low fruit and vegetable intake, trans fat avoidance, high salt-intake, insufficient vitamin-D intake, high blood pressure, high blood cholesterol, low physical activity (sedentary lifestyle), and factors related to mental health problems

The NCD EG Chair introduced the new NCD EG ITA, Mr. Dmitry Titkov. Further, with reference to document CSR 20/6.1/Info 1, he informed about the progress in the implementation of Goal 12⁸. Among the main results where: (i) the NDPHS Action Statement for implementation of the European Strategy for the Prevention and Control of Non-communicable Diseases in the Northern Dimension area in 2012-2016; (ii) draft thematic paper “Healthy Lifestyles – Corner Stone of Public Health. Why we need non-communicable disease prevention and control?”; and (iii) draft NDPHS EG’s & TG’s action for implementation of the European Strategy for the Prevention and Control of Non-communicable Diseases in the Northern Dimension area in 2012-2016.

Further, he informed about the project “Healthier people: management of change through monitoring and action Projects” and explained that the funding had already been secured for its implementation through the EU’s Non-state actors and local authorities programme for the Baltic Sea Region. In addition, co-funding had been secured from the NCM, the Committee for Social Policy of Administration of St. Petersburg and other sources. Further, he informed about the development of flagship projects A and B.

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Germany and Latvia stated that document CSR 20/6.1/Info 1 presenting concrete NDPHS results and their impact was very useful, therefore, it was regrettable that only the ASA EG did not use the opportunity to present its results, in spite of the fact that submission of the information was on a voluntary basis.

The Meeting took note of the information provided, **thanked** the NDPHS Expert Groups and Task Groups for their work towards the implementation of the NDPHS

⁸ Dr. Vienonen’s ppt presentation is available at http://ndphs.org/?mtgs.csr_20_helsinki, in the post-meeting documentation section.

goals and operational targets and **endorsed** the proposal that the Partnership would co-organize, with the City of Turku, a session during the 3rd EUSBSR Forum to be held on 17-19 June 2012 in Copenhagen, Denmark, on cooperation with Russia in the implementation of the EUSBSR, and **mandated** the Secretariat to take the issue forward.

6.2 Monitoring of and reporting on the NDPHS progress

With reference to document CSR 20/6.2/1, the OSH TG Chair introduced a proposal for the presentation of concrete NDPHS results and their impact. He explained that the proposal suggested to use the LFA method to streamline and make reporting more consistent and more oriented towards impacts and producing results. He also noted that the intention was not only to propose changes to the reporting on the activities, but also to the planning of activities.

The Chair remarked that it was important to take into account the reporting to the European Commission on the implementation of the EUSBSR, which had to be consistent with the NDPHS internal reporting in order to avoid double work.

Poland remarked that the main interest of politicians was in receiving information on projects developed/facilitated by the NDPHS and asked how those would be distinguished from the others, where the NDPHS did not play a significant role, so that true NDPHS results could be demonstrated.

Sweden commented that it would, in principle, support a results-based reporting. However, a results-based reporting was a complicated issue: the results and impacts were achieved based on several factors, and with involvement of many partners and networks, thus they could not be singularly contributed to the action of the Partnership and its structures.

The NCD EG Chair and the PPHS EG Chair concurred with the opinion expressed by Sweden.

Latvia stated that it was for the EGs and TGs to suggest the format they would like to use for reporting on the results as long as a good and useful overview of activities, such as in document CSR 20/6.1/Info 1, was presented.

Norway remarked that it was important to provide information with a focus mainly on results and not on performed activities and that it had to be presented in a compact and clear way. It further stated that Norway would welcome the OSH TG Chair's proposal if it would help move in this direction.

Latvia and Germany expressed a view that the reporting format had to be able to present the work both on a policy level and project level.

In response to comments, the OSH TG Chair and the HIV/AIDS&AI EG Chair stated that the proposed reporting could be applied to activities other than projects because the format was sufficiently flexible to use it according to the needs.

Germany, Latvia and Norway stressed that it was important to demonstrate results and the added value provided by the Partnership.

Having thoroughly discussed the issue, the Meeting **agreed** as follows:

- (i) Mr. Wiking Husberg will continue leading an *ad hoc* working group, composed of representatives of the Expert Groups and the Secretariat, for further development of a template document for the presentation of concrete NDPHS results and their impact, which would be used by the EGs and TGs for reporting on their activities. Other interested parties should inform Mr. Husberg of their wish to join the work;
- (ii) the annual progress reports for submission to the forthcoming PAC 9 will be prepared on the basis of the new template, as a testing case;
- (iii) the PAC 9 will decide on the introduction of a new NDPHS reporting mechanism.

6.3 Targets and indicators for the EUSBSR

The European Commission informed about the process of the development of the EUSBSR targets and indicators, both at the Strategy and Priority area levels, and that the Priority Area Coordinators had been invited to submit their proposals for targets and indicators. It also noted that the ambition was to adopt a revised EUSBSR Action Plan by the end of 2012 and remarked that it was necessary to ensure that, after launching the process, the Priority Area Coordinators would be able to steer and follow up closely the implementation process.

The Secretariat stressed that it was important to keep in mind that the targets and indicators were being developed for the whole region, rather than for the NDPHS internally, which warranted the engagement of relevant external stakeholders in the health sub-area coordinated by the NDPHS. Further, with reference to document CSR 20/6.3/2, it presented a proposal for the NDPHS involvement in the review of the EUSBSR Action Plan. The review was supposed to include updates and revisions of the current version of the Action Plan, as well as new elements, most notably proposed targets and indicators for each respective Priority Area.

With reference to document CSR 20/6.3/1/Rev 1, the ASA EG ITA, the HIV/AIDS&AI EG ITA, the NCD EG Chair, a PPHS EG ITA (Dr. Jurgutis) and the OSH TG Chair briefly introduced their groups' draft proposed EUSBSR targets and indicators.

Sweden commented that the proposed targets both on the Strategy and on the health sub-area level were very diverse in their nature, e.g. some of them were measurable, some, on the other hand, process-oriented and that it would be useful to synchronize, at least to some extent, the proposed health-related targets and indicators. It concurred with the Secretariat that it was very important to involve other relevant actors in the region in the process of the development of the EUSBSR targets and indicators. Furthermore, it stated that, for the reasons indicated during previous agenda item, it would prefer process-related indicators rather than impact-related.

Latvia and Germany concurred with Sweden that the health-related targets and indicators should be synchronized.

Latvia stated that it was not in a position to adopt the proposed EUSBSR targets and indicators as contained in document CSR 20/6.3/1/Rev 1 because the time allocated to study the proposal was not sufficient.

Germany stated that it had expected a more regional focus in developing the targets and indicators, as well as more focus on the implementation of the existing strategies and action plans.

The ITA of ASA EG expressed his concern on the proposal of the NDPHS Secretariat on the revision of EUSBSR action plan, due to the time shortage both, for study the request from the EU Commission and for contacting all relevant external stakeholders to collect their inputs for the revision.

The Secretariat regretted the inconvenience and reiterated that the deadline for submission of proposals for the review of the EUSBSR Action Plan was set by the Commission and recalled that the letter from the Commission had been received on Friday, 13 April 2012 and, following approval by the CSR Chair, disseminated to the CSR, the Expert Groups and the Task Groups on Monday, 16 April 2012.

Having thoroughly discussed the issue, the Meeting **agreed** as follows:

(i) Regarding the review of the EUSBSR Action Plan:

- The Expert Groups, Task Groups and Flagship Project leaders will provide their inputs to the review of the EUSBSR Action Plan, according to the procedure stipulated in document CSR 20/6.3/2, until 11 May 2012;
- The Secretariat will compile the inputs received and immediately send the consolidated proposal to the CSR for adoption through a written procedure ending on 25 May 2012;
- Following the approval of the consolidated proposal by the CSR, the Secretariat will submit the NDPHS proposal to the European Commission.

(ii) Regarding the proposed health-related EUSBSR indicators and targets:

- The Expert Groups will submit the final proposed targets and indicators to the Secretariat until 11 May. The final proposals shall take into account the comments expressed by the CSR at its 20th meeting;
- The Secretariat will compile the inputs received and immediately send the consolidated proposal to the CSR for adoption through a two-week written procedure;
- Following approval by the CSR, the Secretariat will submit the NDPHS proposal to the European Commission.

6.4 Revision of the NDPHS Goal 9 and corresponding mid-term operational targets and indicators

With reference to the document CSR 20/6.4/1, presenting the proposal regarding the revision of the NDPHS Goal 9 and corresponding mid-term operational target and indicators, the ASA EG Chair briefly introduced the proposal.

Germany enquired what the added value of the Operational target 9.1 was, given the fact that there was a regular biannual reporting to the WHO on the FCTC.

The ASA EG Chair explained that there was no duplication of efforts and reporting, and that the group aimed at achieving practical results. The proposal was aimed at collecting and discussing, within the ASA EG, the models of regional and good practices with regard to implementation of the WHO FCTC. He mentioned, *inter alia*, that the aim was to use the NDPHS potential to collect information not gathered by the WHO Euro.

Russia commented that it was a practical proposal with added value.

Latvia invited the ASA EG to consider elaboration of arguments to be used by policy makers towards industry, which would be a very useful tool. It also requested for revisions in the indicator 9.1 B, in order to make it clearer.

Following the exchange of views, the ASA EG ITA presented the following amended proposal for the revised Goal 9:

***“Goal 9: Tobacco use and exposure to tobacco smoke is prevented and reduced in the ND area.*”**

Through its partners (including the Convention Secretariat, the WHO Regional Office for Europe and national authorities) the Partnership will contribute to strengthening, as appropriate according to national contexts, the implementation of the WHO Framework Convention on Tobacco Control (WHO FCTC). The Partnership will support actions to bring down prevalence of tobacco use and achieve the public health objectives of the Convention.

Operational target 9.1: By 2013 the Partnership will have developed a case study, to examine country experiences and practices in regard to the implementation of the WHO FCTC and to develop regional good practices.

Indicator 9.1A: Models of regional good practices with regard to the implementation of the WHO FCTC within the ND area collected and analysed; a report developed and disseminated.

Indicator 9.1B: Number of workshops organized on experience exchange connected to the implementation of the FCTC, including exchange between the alcohol and tobacco fields.”

The Meeting considered the presented proposal and **adopted** the proposed revised NDPHS Goal 9 and corresponding mid-term operational target and indicators with the changes in indicators 9.1A and 9.1B as agreed during the meeting.

6.5 Possible topics for inclusion in the list of joint EU-Russia projects in the Baltic Sea Region

The Secretariat thanked Russia for inviting the NDPHS to the EU-Russia meeting hosted by the Russian Ministry of Foreign Affairs held on 22 February 2012 and informed that during the meeting both the Russian Ministry of Health and Social Development as well as the NDPHS Secretariat suggested including several more health-related projects in the list of joint EU-Russia projects in the Baltic Sea Region.

Russia (Ministry of Foreign Affairs) provided further information regarding the above mentioned meeting and its outcomes, and thanked the Secretariat and the Russian Ministry of Health and Social Development for their contributions during the meeting.

Further, with reference to document CSR 20/6.5/1, the Secretariat presented possible topics for inclusion in the list of joint EU-Russia projects in the Baltic Sea Region.

Sweden expressed its firm support to the proposal.

The Meeting considered the presented proposal and **approved** the list of topics for submission to the EU-Russia dialogue group for consideration and inclusion on the list of joint EU-Russia projects in the Baltic Sea Region.

6.6 Other matters

Finland informed that Canada's withdrawal from the NDPHS in late 2011 was followed by withdrawal from chairing the IMHAP TG. As both Canada and the co-lead Partner, the NCM, were unable to continue leading the IMHAP TG, they presented the remaining IMHAP TG members with the opportunity to assume the leadership of the group. However, no other IMHAP member expressed interest in carrying this work forward.

Norway, in its capacity as the Norwegian Presidency of the NCM, stated that, should there be a volunteer ready to take the leadership in the IMHAP TG, both Canada and the NCM would be available to support and facilitate the group's transition to the new chair. At the same time, both Canada and NCM remained interested in sharing information with Partners on indigenous mental health, addictions and parenting issues problems.

Norway stressed that issues related to indigenous peoples were not sufficiently covered in other cooperation formats, therefore, it invited not to abolish the IMHAP TG immediately, but to work on different solutions and discuss them at the forthcoming PAC 9. Norway was not ready to assume the leadership of the Task Group; however, it would continue to participate in the IMHAP TG. It also urged the Expert Groups to consider how issues related to indigenous people could be related to and possibly integrated into the respective groups' work.

Sweden suggested that one could try to explore if the IMHAP TG could be a joint venture with another regional body.

Germany remarked that the need to travel long distances was among the most difficult problems faced by the Task Group, and that this problem would not cease to exist.

The Chair concluded that until the PAC 9 different sustainable solutions would be explored. One solution would be to have a new leadership of the group. In this context, Denmark was mentioned as having a large indigenous population. Further options would include: (i) streamlining the indigenous peoples issues into Partnership's and its groups' activities; (ii) merging the IMHAP TG with another NDPHS group; (iii) merging the IMHAP TG with other regional structure(s).

The Meeting considered the presented information and **agreed** to postpone the final decision on the future of the NDPHS Goal 11 and the IMHAP TG, with a view to finding a sustainable solution until the PAC 9.

Further, with reference to document CSR 20/6.6/1, the Secretariat presented a request from the Kaliningrad regional non-governmental organisation “Young Leaders Army” (YLA) to grant the NDPHS project label to the project “Taking Up The Challenge: Developing Services to Contain the Spread of HIV and TB among Injecting Drug Users in Kaliningrad Oblast.” It mentioned, in particular, that the project had been facilitated by and developed with support of the HIV/AIDS&AI Expert Group and that it was in line with the Goals 2 and 3 of the NDPHS Strategy.

Russia stated that it was not in a position to support the request and that additional information was required, in particular, as regards the applicant.

The HIV/AIDS&AI EG ITA informed that their group strongly supported the idea of granting the NDPHS project label to the project.

The Meeting considered the presented request and **agreed** to take a decision on granting the NDPHS label to the project “Taking Up The Challenge: Developing Services to Contain the Spread of HIV and TB among Injecting Drug Users in Kaliningrad Oblast” through a written procedure.

7. Legal capacity of the NDPHS Secretariat

7.1 Entry into force of the Agreement on the establishment of the NDPHS Secretariat

The Chair informed that the following countries had completed their national procedures necessary for the entry into force of the Agreement on the establishment of the NDPHS Secretariat: Estonia, Finland, Latvia and Russia. Norway, Sweden⁹ and Germany were expecting to complete the procedures soon.

Russia informed that the Depositary had received a notification only from Latvia and Russia and invited the countries concerned to notify the Depositary at their earliest convenience¹⁰.

Lithuania informed that the procedures for authorizing the signing of the Agreement had been completed and it would sign the Agreement in a very near future.

Poland informed that the procedures for authorizing the signing of the Agreement were not completed yet.

Norway requested Russia to send a certified copy of the Agreement to the countries - signatories.

⁹ The minutes correctly state that Sweden indicated the likelihood of the finalization of its national legal procedures before summer. However, further legal analysis has made it clear that the signing of the Host Country Agreement (HCA) must be carried out before the Swedish Parliament can adopt the amendment of the Law on Immunities and Privileges. This adoption is necessary for the Swedish national procedures (“Ratification”) to be finalized. The signing of the HCA by the Secretariat can only be done when the Agreement has entered into force. In conclusion, Sweden is unable to finalize its national legal procedures until the Agreement has already entered into force.

¹⁰ As of 22 May 2012, the Depositary has also received a notification from Finland.

The Meeting considered the presented information and **requested** the respective Partner Countries to do their utmost to sign/ratify the Agreement on the establishment of the NDPHS Secretariat as soon as possible.

7.2 Finalization and signature of the Host Country Agreement

Sweden informed that the internal discussions on the Host Country Agreement had been completed, however, a few issues remained open for discussion with the Secretariat. After those would be resolved, a bill will be submitted to the Parliament, either already before the summer break or in early autumn.

The Secretariat thanked Sweden for all the support and stated that a few issues had to be further discussed with the Partners, such as procedure of signing of the Host Country Agreement. Further, it stressed that as soon as the discussion between the Host Country and the Secretariat reaches its end, it would send the text of the Host Country Agreement to all parties concerned in an attempt to seek their support/approval.

The Meeting **took note** of the presented information.

7.3 Internal regulatory framework for the NDPHS Secretariat with its own legal capacity

- a) **NDPHS Secretariat Personnel Handbook**
- b) **NDPHS Secretariat Financial Rules**
- c) **NDPHS Secretariat Internship Handbook**

The Chair explained that, as soon as the Agreement on the establishment of the NDPHS Secretariat would come into force, these would be the Parties to the Agreement that will be jointly deciding on issues related to the Secretariat, including but not limited to its regulatory framework. Until such time, however, it was the CSR that had a role here. For this reason the Secretariat had submitted the draft NDPHS Secretariat Personnel Handbook, the draft NDPHS Secretariat Financial Rules and the draft NDPHS Secretariat Internship Handbook to the meeting. Considering that the issues covered by the three documents would soon fall into the hands of the Parties to the Agreement, the Chair and the Secretariat propose that the CSR mandate the countries-signatories of the Agreement, as well as other interested Partner Countries, to take further steps to have the documents finalized so that they can be adopted by the Parties to the Agreement in due time.

The Meeting considered the presented information and:

- (i) **mandated** the countries-signatories of the Agreement, as well as other interested Partner Countries, to take further steps to have the draft NDPHS Secretariat Personnel Handbook, the draft NDPHS Secretariat Financial Rules and the draft NDPHS Secretariat Internship Handbook finalized so that they can be adopted by the Parties to the Agreement in due time;
- (ii) **invited** all interested Partners to submit, to the NDPHS Secretariat by 21 May 2012, comments to the draft NDPHS Secretariat Personnel Handbook, the draft NDPHS Secretariat Financial Rules and the draft NDPHS Secretariat Internship Handbook.

8. Follow-up of discussions and decisions taken during the PAC 8

8.1 NDPHS Position Paper: Raising the Profile of Health and Social Well-being

The Chair and the Secretariat informed about current and planned activities to increase the profile of health and social well-being among the priorities of the funding programmes operating in the Northern Dimension region, including about the letters sent to Commissioners Dalli and Hahn and the members of the BSR Programme 2007-2013 Monitoring Committee and the BSR Programme 2014-2020 Joint Programming Committee, as well as a number of publications, including in the BSSSC, the eHealth for Regions Network, the Scanbalt and the UBC newsletters, and the Baltic Rim Economies.

The Meeting considered the presented information and:

- (i) **invited** the Partners and NDPHS structures to take within their countries/organizations/bodies actions to publicize and promote the ideas and messages contained in the NDPHS Position Paper on raising the profile of health and social well-being among relevant stakeholders and, in particular, the members of the BSR Programme 2014-2020 Joint Programming Committee;
- (ii) **endorsed** the proposal that, if invited, the Partnership would take actions to publicize and promote the ideas and messages contained in the NDPHS Position Paper on raising the profile of health and social well-being during the 21st Baltic Sea Parliamentary Conference to be held on 26-28 August 2012 in St. Petersburg, Russia, and **mandated** the Chair and the Secretariat to take the issue forward.

8.2 NDPHS Action Statement for implementation of the European Strategy for the Prevention and Control of Non-communicable Diseases in the Northern Dimension area in 2012-2016

With reference to document CSR 20/8.2/Info 1, the NCD EG Chair introduced the thematic paper “Healthy Lifestyles – Corner Stone of Public Health. Why we need noncommunicable disease prevention and control?” and asked for a permission to publish it on the NDPHS website.

Sweden stated that it considered the document as not finalized and that it had to be further consulted with experts, thus it could not agree with posting the document on the website immediately.

Russia expressed an opinion that the document should be published on the website.

Germany commented that the disclaimer stating that the thematic paper did not reflect the NDPHS position was confusing.

In response to a question posed by Norway the NCD EG Chair explained that all groups but the ASA EG had endorsed the idea to post the thematic paper on the website.

The ASA EG Chair suggested trying to achieve consensus on the content of the thematic paper.

The Meeting considered the presented information and **invited** the NCD EG Chair to have an additional round of consultations on the thematic paper and, following an agreement on its content, to publish the thematic paper, with a proper disclaimer included, on the NDPHS website without submitting it to the forthcoming PAC for approval.

Further, with reference to document CSR 20/8.2/1, the NCD EG Chair introduced the “NDPHS EGs’ & TGs’ action for implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases in the Northern Dimension area in 2012-2016” (the former draft Annex 2 to the NDPHS Action Statement for Implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases in the Northern Dimension area in 2012-2016).

Sweden stated that, in line with its opinion as expressed during the PAC 8, it fully supported the conclusion of the 13th EG Chairs and ITAs meeting regarding the status of the presented document.

Norway concurred with Sweden.

The Meeting considered the presented information and **agreed** to disregard the originally proposed draft Annex 2 to the NDPHS Action Statement, with an understanding that it would be taken into account by the Expert and Task Groups in their future work, as appropriate, and on a voluntary basis.

8.3 Coordinated call for proposals European Social Fund BSN – NDPHS

With reference to document CSR 20/8.3/1 the Secretariat informed about the state of play regarding synchronization of ESF-supported calls for project proposals with the NDPHS engagement and proposed further steps. Further, with reference to document CSR 20/8.3/2 it introduced a proposal regarding the NDPHS engagement in and support to a regional event “Working Life – Baltic Sea Arena 2012” which should be seen as a part of the process of cooperation with the European Social Fund.

Poland thanked the Secretariat for taking an action consistent with the respective PAC 8 decision and stated that it was strongly interested in using the NDPHS network for promoting transnational cooperation. It also noted that Polish institutions highly appreciated the Partnership’s involvement in this process and suggested that it would be a good occasion for other Partners to consider synchronizing similar calls for proposals within their respective countries, with the help of the Partnership.

Norway supported proposal regarding the NDPHS engagement in and support to a regional event “Working Life – Baltic Sea Arena 2012”. Regarding the proposed NDPHS engagement in synchronization of ESF-supported calls for project proposals it asked for further clarifications, in particular, if the Expert Groups were well informed of the initiative, including the workload it involved.

The Secretariat explained that the issue had been discussed first during the EG Chairs and ITAs meeting in September last year and, more in detail, during the latest meeting in February this year. The proposal is not meant to imply that all the Expert Groups would need to be involved and that the proposed involvement needs to cover

all listed aspects. It further explained that one can take a selective approach and the Partnership bodies can share work, e.g., in many instances it would suffice if only the Secretariat or one Expert Group participated and conveyed messages from the Partnership. It concluded by stating that it was for the Expert Groups to decide if and to what extent they would like to be involved.

The ASA EG Chair stated that, if there was an invitation in line with the Partnership's priorities and activities, it would be interesting to engage in cooperation as presented by the Secretariat, provided that the groups' engagement was on an *ad hoc* basis and they could be selective.

The Meeting considered the presented information and **decided** that further NDPHS engagement in cooperation with the BSN-ESF would consist in the following (selective approach can be exercised by the Expert Groups):

- (i) Co-organization of/supporting organization of the international project partner search forum in autumn 2012 where the NDPHS would present itself, share its views on types of projects that could be supported along the lines of the ESF calls for proposals, and suggest to those interested possible project partners;
- (ii) Co-organization of/supporting organization of the above-mentioned event "Working Life – Baltic Sea Arena 2012;"
- (iii) Subject to possible requests by intermediate bodies and implementing authorities and subject to agreement of the respective NDPHS Expert and Task Groups, assessment and selection of the project proposals submitted to the ESF-supported calls for proposals;
- (iv) Participation in the assessment and evaluation of the outcomes and results of a few (to be) selected ESF-supported projects of regional importance. In particular, the NDPHS should play a role in the dissemination and promotion of the lessons learned, best practices, etc.

9. Preparations for forthcoming PACs and related events

9.1 PAC 9 and its side-event in 2012

Germany informed that the PAC 9 would take place at the German Foreign Office in Berlin, on 30 October 2012. The side-event is proposed to be held the day before, as an introduction to the upcoming Partnership's evaluation in 2013, which would be organized as a workshop with an aim to explore how the Partnership's work could be further improved by better aligning the political level and expert level structures of the organisation. Among the issues to be addressed would be the ownership, effectiveness, communication strategy, responsibilities etc. Participants would include the EG Chairs and co-Chairs, the CSR members and the Secretariat.

Sweden strongly supported the proposed side-event theme.

The Meeting took note of the presented information and **agreed** to the proposed side-event theme.

9.2 Ministerial-level PAC 10

Finland informed that it would host the ministerial-level PAC 10 in October or November 2013.

The Meeting **took note** of the presented information.

9.3 Other regional NDPHS events in 2013

Finland informed that the 8th Global Conference on Health Promotion would be held in Helsinki on 10-14 June 2013 and that one idea being explored by Finland was to organize the PAC side-event in connection with this conference. A possible theme for the side-event could be HIV/AIDS and tuberculosis. However, several issues had to be clarified before making a final proposal, e.g. the timeframe available for the NDPHS, etc. Finland will come back in due time with further details.

Lithuania noted that it would assume the Presidency of the EU in 2013, which could also provide some opportunities for increasing the visibility of the Partnership.

The Meeting **took note** of the presented information.

10. Forthcoming periodic evaluation of the NDPHS

With reference to document CSR 20/10/1, the Secretariat introduced issues pertaining to the forthcoming periodic evaluation of the NDPHS and proposed further steps in this regard.

Germany expressed a view that the overall approach and Terms of reference of the forthcoming periodic evaluation should be similar to the previous evaluation.

Norway stated that it would prefer to employ a company rather than an independent consultant.

Germany clarified that it was a company that was employed last time, not a private person. They worked in a team with the lead consultant being the main face of it.

Finland and Sweden noted that they support the idea of employing the same consultant that made the previous evaluation.

The HIV/AIDS&AI EG ITA expressed a view that more time should be allocated for interviews with the Expert Groups, the Chairs, the ITAs and, possibly, Expert Groups' members.

Lithuania suggested that at least two evaluators should be employed.

Poland enquired if tendering procedure was mandatory.

Germany explained that there was no obligation to run a tender. It also stated that it was willing to contribute financially to the evaluation process in the amount of up to 20,000 EUR.

The Chair enquired if policy evaluation should also be performed.

Norway stated that the point raised by Chair should be looked into.

The Meeting considered the presented information and **invited** the Secretariat to prepare a decision document (including the necessary attachments) for the PAC 9.

11. Financial matters

11.1 Statement of accounts and Audit report for FY 2011

With reference to document CSR 20/11.1/Info 1 the Secretariat introduced the Statement of accounts of the NDPHS Secretariat for the FY 2011. It informed, *inter alia*, that all the Partner Countries had paid their contributions for 2011 and that there were budget savings in FY 2011. It also thanked Germany for financial support in organizing the PAC 8 side-event, Sweden for its generous voluntary contributions and the European Commission for technical assistance for the implementation of the EUSBSR. It also thanked Sweden for providing the Secretariat's premises and majority of maintenance costs free of charge and expressed a hope that this pattern would continue also after the Secretariat has obtained its legal capacity. Further, it informed that the outcome of the external audit of the FY 2011 accounts of the CBSS Secretariat, as produced by the Swedish State Audit Office, was positive as regards the NDPHS accounts.

The Meeting **considered** the Statement of accounts of the NDPHS Secretariat for the FY 2011. It **decided** to transfer the unused funds from the main FY 2011 budget (EUR 17,201) to the Appropriations Account. Finally, it **discharged** the Secretariat from responsibility with regard to the implementation of the NDPHS budget in FY 2011.

11.2 Appropriations Account

With reference to the Statement of accounts of the NDPHS Secretariat for the FY 2011 (submitted as document CSR 20/11.1/Info 1) the Secretariat presented information about the funds transferred to and spent from the NDPHS Appropriations Account since the CSR 19 and the funds currently available in the account.

11.3 Current financial situation of the NDPHS Secretariat and contributions to the NDPHS budget for FY 2012

With reference to the document presenting actual and projected contributions and expenditures during 2011-2013 (submitted as document CSR 20/11.3/Info 1), the Secretariat informed the Meeting about the current financial situation of the NDPHS Secretariat. As regards the contributions to the NDPHS budget for FY 2012, the CBSS Secretariat Administration has confirmed that as of 9 April 2012 annual contributions have been received by the NDPHS Secretariat from the following countries: Estonia, Finland, Germany (first 50% instalment), Latvia, Lithuania, Poland and Sweden.

Further, the Secretariat informed that during the in-camera session the Partner Countries had discussed the situation with the missing contributions from Canada and Iceland in 2012 and have agreed on the following steps/alternative sources of funding to bridge the gap: (i) with reference to the respective provisions in the NDPHS Strategy Canada would be approached to discuss its possible contribution to the budget for 2012, taking into account the fact that Canada had announced its decision to withdraw from the Partnership after the budget for FY 2012 had been adopted which foresees contributions from all the then Partner Countries; (ii) the European Commission would be approached with a view to discuss its extraordinary

contribution to the NDPHS budget; (iii) the Secretariat would endeavor every possibility of making savings in the 2012 budget and (iv) any remaining gaps in the FY 2012 budget would be balanced with funding from the Appropriations Account. Finally, consistent with earlier discussions among the Partner Countries, the Secretariat invited the Meeting to consider the Iceland's statement of non-payment of contributions to the NDPHS budget during two-three years starting with 2012 and a possibility to keep Iceland as a NDPHS Partner and be exempted from paying contributions for the next two years.

Norway commented that it had the understanding that Iceland had actually paid its membership fee every year since 2009, but that it had been back-dated each year because of non-payment in 2008.

The Secretariat responded that Iceland had paid its contributions for past years. During the recent years these contributions were received by the Secretariat in the beginning of each following year and were for the immediately preceding year¹¹.

Norway proposed that any gaps could be filled from the Appropriations Account on a condition that using the appropriations to fill the gaps in the budget is an exception, and that the draft budget for next two-three years would be presented to the PAC 9.

The Secretariat responded that it is available to submit draft budget for the next two-three financial years, however, it noted that in the context of establishing a Secretariat with its own legal capacity one needs to recognize the fact it is impossible to estimate the expenditures for running of the NDPHS Secretariat precisely.

The Meeting took note of the presented information and:

- (i) **invited** the Partner Countries, which have not paid their contributions so far, to do so promptly to ensure the Secretariat's financial liquidity. Considering the fact that Canada had announced its decision to withdraw from the Partnership after the budget for FY 2012 had been adopted by the CSR 19, and the call for contributions to the budget made by the Secretariat, the Meeting requested the CSR Chair to approach Canada with a request that Canada would honour its financial commitment and pay the outstanding contribution of EUR 39,163;
- (ii) **invited** Iceland to continue as a NDPHS Partner, and agreed that Iceland be exempted from paying contributions to the NDPHS Secretariat budget for FY 2012-2013. While recognizing that the issues of being a Party to the Agreement on the establishment of the NDPHS Secretariat and paying annual

¹¹ Contributions paid by Iceland have been reported on in the following annual statements of accounts:

http://www.ndphs.org//documents/66/CSR_11-10.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2006.pdf](#)

http://www.ndphs.org//documents/976/CSR_13-9.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2007.pdf](#)

http://www.ndphs.org//documents/1578/CSR_15-8.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2008.pdf](#)

http://www.ndphs.org//documents/2167/CSR_17-8.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2009.pdf](#)

http://www.ndphs.org//documents/2532/CSR_18-10.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2010.pdf](#)

http://www.ndphs.org//documents/3029/CSR_20-11.1-

[Info 1 Statement of accounts of the NDPHS Secretariat for 2011.pdf](#)

contributions to the NDPHS Secretariat's budget are different from each other, the CSR would welcome Iceland's early decision to accede to the Agreement;

- (iii) during the in-camera meeting the Partner Countries decided that there should be no increase in contributions in 2013. To balance the missing contributions from Iceland and Canada the Secretariat should aim at savings and/or use the Appropriations Account. Consequently, the Meeting **invited** the Secretariat to submit a revised draft budget for FY 2013 to the PAC 9;
- (iv) **invited** the Secretariat to submit a draft NDPHS budget for FYs 2013-2015 to the PAC 9.

11.4 NDPHS budget for FY 2013

The Secretariat introduced a proposed draft NDPHS budget for FY 2013 (submitted as document CSR 20/11.4/1). It explained that the budget was presented in Swedish Kronor (SEK) consistent with the proposed Financial rules submitted in item 7.3 b, and that the proposal foresaw that the NDPHS Secretariat would have its own legal capacity. As requested by the CSR, the Secretariat will submit to the PAC 9 a revised draft budget for FY 2013 with possible savings included.

Latvia and Poland stressed that, because of their respective national procedures, they had to know the amount of contributions for 2013 as soon as possible and autumn was too late in this respect.

The Meeting considered the presented proposal and **invited** the Secretariat to submit to the PAC 9 a revised draft budget for FY 2013 with savings included.

12. Future CSR meetings

The Chair invited the Partners to consider offering to host the CSR 21 meeting in spring 2013 and to inform the Meeting accordingly.

The Meeting **invited** the Chair Country and the Secretariat to continue to work with the Partners in order to determine the host of the next CSR meeting.

13. Any other business

No issues were discussed during this agenda item.

14. Adoption of the CSR 20 meeting minutes

The Secretariat proposed that it would send out draft CSR 20 meeting minutes to the participants on 11 May 2012 and that comments on the draft would be due, at the latest, on 5 June 2012. The revised minutes would be distributed on 7 June 2012 to be adopted *per capsulam* provided that no further comments are submitted within one week.

The Meeting **agreed** to the proposed procedure.

15. Closing of the meeting

The Chair thanked the participants for the very good meeting. Further, she thanked Dr. Göran Carlsson for his excellent work and cooperation and wished him all the best with his future plans. Finally, she thanked the Secretariat for assistance in preparing the meeting.

Norway, on behalf of all participants, thanked Finland for its excellent work in organizing and chairing the meeting.

The Meeting closed on 20 April 2012 at 12:00 hours.

| | |
|-----------------------|---|
| Reference | Annex 1 |
| Title | List of documents submitted to the meeting |
| Summary / Note | This list includes all documents submitted to the meeting |

Main documents

| Code | Title | Submitted by | Date |
|---------------------|---|---------------------------|-------------|
| • CSR 20/2/1 | Provisional agenda with timetable | Secretariat | 14/03/12 |
| • CSR 20/2/2 | Provisional annotated agenda | Secretariat | 11/04/12 |
| • CSR 20/3/Info 1 | Proposed thematic concentration for the future European territorial cooperation programmes | Finnish member of the JPC | 13/04/12 |
| • CSR 20/4/Info 1 | Meetings of relevance to the NDPHS, which were recently attended or are planned to be attended by the CSR Chair Country and the Secretariat | Secretariat | 04/04/12 |
| • CSR 20/5/Info 1 | Results of a call for proposals directed at the non-state actors and local authorities in the Baltic Sea region (within the priorities of the Northern Dimension) | European Commission | 04/04/12 |
| • CSR 20/5/Info 2 | Council conclusions on the review of the European Union Strategy for the Baltic Sea Region | European Commission | 04/04/12 |
| • CSR 20/5/Info 3 | Communication from the Commission concerning the European Union Strategy for the Baltic Sea Region | European Commission | 04/04/12 |
| • CSR 20/5/Info 4 | BSSSC newsletter featuring a NDPHS Secretariat article | BSSSC | 04/04/12 |
| • CSR 20/6.1/Info 1 | Concrete NDPHS results and their impact | Secretariat | 04/04/12 |
| • CSR 20/6.2/1 | New proposal for the presentation of concrete NDPHS results and their impact | OSH TG Chair | 13/04/12 |

- CSR 20/6.3/1 Proposed targets and indicators for the Priority Area 12, health sub-area of the EUSBSR Action Plan Secretariat 04/04/12
- CSR 20/6.3/1/Rev 1 Revised proposed targets and indicators for the Priority Area 12, health sub-area of the EUSBSR Action Plan Secretariat 11/04/12
- CSR 20/6.3/2 NDPHS involvement in the review of the EUSBSR Action Plan Secretariat 19/04/12
- CSR 20/6.4/1 Proposed revised Goal 9 and corresponding mid-term operational target and indicators ASA Expert Group 11/04/12
- CSR 20/6.5/1 Proposed topics for inclusion on the list of joint EU-Russia projects in the Baltic Sea Region Secretariat 04/04/12
- CSR 20/6.6/1 Request to grant the NDPHS project label to the project: "Taking Up The Challenge: Developing Services to Contain the Spread of HIV and TB among Injecting Drug Users in Kaliningrad Oblast" Kaliningrad regional non-governmental youth organisation "Young Leaders Army" (YLA) 04/04/12
- CSR 20/6.6/Info 1 Rules regarding dissolution of Expert Groups as stipulated by the NDPHS Strategy document Secretariat 04/04/12
- CSR 20/7.3a/1 Draft NDPHS Secretariat Personnel Handbook Secretariat 13/04/12
- CSR 20/7.3b/1 Draft NDPHS Secretariat Financial Rules Secretariat 13/04/12
- CSR 20/7.3c/1 Draft Internship Handbook of the NDPHS Secretariat Secretariat 13/04/12
- CSR 20/8.2/1 NDPHS EGs' & TGs' action for implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases in the Northern Dimension area in 2012-2016 NCD EG Chair 04/04/12
- CSR 20/8.2/Info 1 Thematic paper "Healthy Lifestyles – Corner Stone of Public Health. Why we need noncommunicable disease" NCD EG Chair 04/04/12

prevention and control?"

- CSR 20/8.3/1 State of play regarding ESF-supported calls for project proposals with the NDPHS engagement and the proposed further steps Secretariat 11/04/12
- CSR 20/8.3/2 Proposal regarding the NDPHS engagement in and support to a regional event "Working Life – Baltic Sea Arena 2012" Secretariat 11/04/12
- CSR 20/8.3/Info 1 ESF-supported calls for project proposals with the NDPHS engagement Swedish ESF Council 11/04/12
- CSR 20/9.1/Info 1 Themes of the past NDPHS PAC side-events Secretariat 04/04/12
- CSR 20/10/1 Evaluation of the NDPHS in 2013 Secretariat 04/04/12
- CSR 20/11.1/Info 1 Statement of accounts of the NDPHS Secretariat for FY 2011 Secretariat 04/04/12
- CSR 20/11.1/Info 2 Audit report for the CBSS Secretariat for FY 2011 Secretariat 13/04/12
- CSR 20/11.3/Info 1 Actual and projected contributions to and expenditures from the NDPHS main budget during 2011-2013 Secretariat 11/04/12
- CSR 20/11.4/1 Draft NDPHS budget for FY 2013 Secretariat 11/04/12
- CSR 20/12/Info 1 Dates, locations and hosts of CSR meetings Secretariat 04/04/12

Auxiliary documents

| Code | Title | Submitted by | Date |
|-----------------------|--|--------------|----------|
| • CSR 20/Info 1 | Practical information for participants | Secretariat | 14/03/12 |
| • CSR 20/Info 2 | Preliminary timetable | Secretariat | 04/04/12 |
| • CSR 20/Info 3 | List of documents | Secretariat | 04/04/12 |
| • CSR 20/Info 3/Rev 1 | Revised list of documents | Secretariat | 11/04/12 |

- CSR 20/Info 3/Rev 2 2nd revised list of documents Secretariat 13/04/12
- CSR 20/Info 3/Rev 3 3rd revised list of documents Secretariat 13/04/12
- CSR 20/Info 4 Preliminary list of participants Secretariat 13/04/12

| | |
|-----------------------|---|
| Reference | Annex 2 |
| Title | List of participants |
| Summary / Note | This list includes all persons who attended the meeting |

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