

**Committee of Senior Representatives (CSR)  
Twenty-fourth Meeting  
Brussels, Belgium  
15-16 April 2015**

<b>Title</b>	Minutes from the 24 <sup>th</sup> Meeting of the NDPHS Committee of Senior Representatives
<b>Submitted by</b>	Secretariat
<b>Summary / Note</b>	This document outlines the main discussion points and decisions made during the 24 <sup>th</sup> meeting of the CSR
<b>Annexes</b>	Annex 1 – Terms of Reference and Timeline for the NDPHS <i>ad hoc</i> Working Group on Expert Groups' Terms of Reference (EGTOR 2015) Annex 2 – List of participants Annex 3 – List of documents submitted to the meeting

## **1. Opening of the meeting and welcome**

The meeting was opened and chaired by Ms Dagmar Reitenbach, the NDPHS Chair Country representative, the Federal Ministry of Health of Germany.

Ms Isabel de la Mata, representing the Host, the Commission, welcomed the meeting participants and wished them a fruitful meeting. In her opening remarks she noted, *inter alia*, that the EU attaches great importance to cooperation within the NDPHS network and encouraged intensified cooperation in order to improve health and well being of people living in the ND area. She also noted that the European Commission was a founding partner of the NDPHS and that, in addition to being actively involved in various NDPHS' activities, it had also been providing financial and technical support, including funding for activities contributing to the EUSBSR, as well as funding from the EU Public Health Programme. She also welcomed the work of the NDPHS Strategy Working Group and acknowledged the progress made in the revision of the Health Policy Area in the EUSBSR, with a view to avoiding duplication and clearly explaining the added value. Finally, Ms Isabel de la Mata expressed support to promoting the Health in All Policies approach, as well as strengthening NDPHS' relations with other relevant actors in the region and maximizing the benefits of the cooperation within the network.

## **2. Adoption of the agenda**

The Meeting **adopted** the Provisional agenda with timetable (submitted as document CSR 24/2/1).

### 3. Information by the NDPHS Chairmanship and the NDPHS Secretariat

Germany noted that efforts to promote the visibility of the Partnership had been successful and the visibility of the Partnership was constantly increasing, resulting in an increasing number of invitations to present the Partnership at various events, including the Standing Committee of the Baltic Sea Parliamentary Conference (BSPC) held on 23 January 2015, as well as a number of other upcoming meetings, such as a conference of the Friedrich Ebert Foundation on Baltic Sea Cooperation on Innovation in Health and the Baltic Sea Youth Forum in Kiel.

The Secretariat informed about the participation in the BSPC Standing Committee meeting on 23 January 2015, which welcomed the possibility to further cooperate with the NDPHS, including on organizing a side-event during the BSPC annual conference in August 2015, should the EU funding applied for by the Secretariat be granted. The event would focus on the importance of health for economy and other sectors.

The Chair informed with regret, that, despite numerous efforts to strengthen Denmark's commitment to the Partnership, the country requested to be deleted from the NDPHS mailing list.

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

### 4. Information by the NDPHS Partners

Poland informed that it had signed the Agreement on the establishment of the NDPHS Secretariat on 14 April 2015.

NCM (Nordic Council of Ministers) drew the Meeting's attention to the report of Mr Bo Könberg on the future Nordic cooperation on health,<sup>1</sup> which had been presented to the Council of Ministers of the five Nordic Countries in 2014 and emphasized that one of the recommended areas for cooperation was on measures against the increasing antibiotic resistance and resistance to drugs against tuberculosis and malaria, which would fit very well with the priorities of the NDPHS Strategy 2020.

Germany informed about the project application from the AMR TG for a project supplementing the on-going "Northern Dimension Antibiotic Resistance Study (NoDARS)" project.

The Commission welcomed inclusion of the antimicrobial resistance among the priorities for cooperation.

The Commission informed about possible financing and support from the EU for:

- The Secretariats of the ND Partnerships in carrying out specific activities within their remit (small amount of funding available in the form of an operational grant);
- Events/seminars: benefiting from a large Service contract signed by the EU for logistics of events, covering Eastern Partnerships, Black Sea region and Northern Dimension (service contract tender had been launched and should be contracted around September/October 2015);
- Small scale activities via service contracts (under above mentioned framework contract): technical assistance or studies.

The ND Partnerships were therefore invited to submit short concepts on what would be needed

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<sup>1</sup> Available at: <http://norden.diva-portal.org/smash/get/diva2:723237/FULLTEXT01.pdf>

(with idea of value), taking into account that maximum duration of the technical assistance would be two years and maximum value 300,000 EUR per contract. Finally, in order to prepare the next annual programme (2016), all ND Partnerships were invited to provide information on what would be needed to support their work.

Finland referred to important WHO Action Plan on Antimicrobial Resistance, which is planned to be adopted during the World Health Assembly in May 2015 and informed about the Global Health Security Agenda (GHSA). Finland is currently chair of the GHSA which focus is on health system strengthening, preparedness and antimicrobial resistance. It is a joint collaboration of over 40 countries and international organizations. The aim is to help countries fulfill their International Health Regulations commitments to improve their capacities to better prevent, detect and respond to the threat of infectious diseases through multisectoral collaboration.

IOM informed about the organization's engagement in adding a health strand to the MIPLEX (Migrant Integration Policy Index). The results would be presented in the next few months and discussed at a thematic session during the Equi Health final conference to take place in the first quarter of 2016. Another IOM project involving the Department of Maternity and Child Health of the University of Uppsala, Sweden, addresses the problems of migrants in Sweden and Benelux countries.

The Meeting took note of the provided information with appreciation and **invited** the Expert and Task Groups to approach the Secretariat with ideas for activities to be funded through service contracts, to be subsequently communicated by the Secretariat to DG NEAR.

## **5. NDPHS Strategy 2020 and its Action Plan**

### **5.1 NDPHS Strategy 2020**

With reference to document CSR 24/5.1/1, the SWG Chair presented the strategy development process and introduced the draft NDPHS Strategy 2020. She expressed her hope that after over a year of work, which was sufficient time for all interested actors to comment, the Strategy could be adopted. She thanked all actors involved in the strategy development for their cooperation throughout the process, as well as the Strategy Consultant for his valuable support, Germany and Finland for their voluntary financial contributions to employ a Strategy Consultant, as well as Germany for its voluntary financial contribution to the NDPHS Secretariat enabling the latter to organize a training addressing the needs of the NDPHS expert-level structures in the context of the strategy development.

The Chair thanked the SWG Chair for her excellent work and, to facilitate the decision-making process, introduced a proposal regarding the outstanding comments and requests to be included in the final document. The Chair:

- Suggested to accept footnote No. 1, the proposal of the WHO Europe to show linkages of the NDPHS' planned work with the action plans and policies adopted by all 53 Member States of the WHO European Region, which all NDPHS Partner Countries belong to and to attach the list of those documents (Annex 1<sup>2</sup>) to the Strategy. This also resolves Sweden's request in footnote No. 5;

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<sup>2</sup> The Commission asked that the listing be internally consistent in terms of the titles of the strategies and policies i.e. all items listed should be listed as 'WHO Strategy on...', 'WHO Regional Policy on ...' etc.

- Emphasized that the gender aspect was taken into account under 2.1 “(...) regardless of their gender (...)”, and therefore not to approve of the changed wordings suggested by Sweden in footnote No. 2;
- Requested the HIV/AIDS & AI EG to make a proposal for addressing footnote No. 6;
- Suggested specifically mentioning children in the text, as proposed by WHO Europe in footnote No. 7;
- Suggested to include a reference to the draft Global Action Plan on combatting antimicrobial resistance, as suggested by Sweden in footnote No. 11;
- Suggested to include the sentence “All statistics shall be disaggregated by sex”, as suggested by Sweden in footnote No. 18;
- Not to accept other suggestions and proposals from the footnotes included in the document CSR 24/5.1/1 as “to be discussed.”

Sweden explained the background for its proposals and announced that in case the Chair’s proposal was accepted it would see its concerns to be partly taken into account and therefore, in a spirit of compromise, was prepared to withdraw all other proposals.

The Commission questioned the rationale of emphasizing prisoners in the title of objective 1 since it seemed to discriminate against the other, perhaps more numerous vulnerable groups. Germany provided an explanation.

Norway noted that it would not like to adopt the strategy without involving the political level as it considered it important that they could see how the priorities that they themselves had adopted in the Helsinki ministerial meeting in 2013 would be followed up. It would therefore like to see a final draft without track-changes and footnotes that could be presented to the political level before it was ready to adopt the final version.

Russia noted that they would also present the final draft of the Strategy to their respective political level decision makers.

Having thoroughly discussed the matter, the Meeting **agreed** to the Chair’s above proposal as well as the following revisions and additions:

- Change the headline of Objective 5 to “Adequately addressed health *and social* needs related to chronic conditions and demographic changes (...)”;
- Use the wording “HIV, TB and associated infections” throughout the text of the Objective No. 1 in order to make it consistent with the title, as well as add “children and youth,” in order to highlight this population group;
- Keep the title of the Objective 1 as presented in the document CSR 24/5.1/1;
- Accept minor changes regarding Objective 6 as proposed by the OSH TG Chair and presented by the SWG Chair during the meeting.

Furthermore, the Meeting:

- **Agreed** that a consensus had been reached on the final draft of the NDPHS Strategy 2020;
- **Thanked** the SWG Chair for her excellent work;
- **Mandated** the SWG Chair, assisted by the Secretariat and with support of the SWG members, if required, to revise the draft NDPHS Strategy 2020 consistent with the

comments expressed during the meeting and send the revised document to the CSR for final approval through a written silent procedure.

## **5.2 Action Plan accompanying the NDPHS Strategy 2020**

With reference to document CSR 24/5.2/1, the SWG Chair introduced the 7<sup>th</sup> working draft Action Plan accompanying the NDPHS Strategy, as well as presented the development process of the document. She noted, *inter alia*, that the suggested activities were not linked to any specific NDPHS structures, but rather were for the Partnership as a whole to achieve.

The Chair, while thanking all those involved for the work on the draft Action Plan, noted that the submitted draft was not ready for adoption, therefore, the main aim would be to agree on the way forward to finalize the document as soon as possible. She further invited the participants to share their general comments regarding the draft, suggestions for dealing with general open issues, as well as the process for finalization of the Action Plan.

Norway proposed that the Horizontal actions (chapter 1.3) be taken out from the draft Action Plan and that, instead, it be taken into a revised Terms of Reference (ToR) of the Secretariat or other documents related to Secretariat's responsibilities.

In response to Sweden's request for further details, Norway clarified that the chapter on Horizontal actions with very detailed descriptions would give the incoming new Director of the Secretariat very limited scope of action and thinking on how to bring the Partnership forward if all activities for the Secretariat were predefined for the next years. Norway would be happy to chair an *ad hoc* working group that would look into the ToR of the Secretariat if that would be needed.

The Secretariat, the SWG Chair, WHO Europe and the Chair noted that their understanding of the Horizontal actions was that the Partnership as a whole and all its actors would be responsible for implementation of these actions. The SWG Chair noted that, although the implementation of the Horizontal actions was not the Secretariat's responsibility, there were many activities that were purely the Secretariat's tasks and from that perspective she partly agreed with Norway that one could interpret the Horizontal actions as the Secretariat's work plan.

In a response to a question by the Secretariat, the SWG Chair stated that she understood the concerns regarding the chapter on Horizontal actions, and proposed that she would develop, together with the Secretariat, a new more general chapter on Horizontal actions that could be presented to the CSR, with the understanding that a separate action plan for the Secretariat would need to be developed in addition.

Norway responded that it was very content with the SWG Chair's compromise proposal.

The Commission welcomed the fact that, learning the lessons of the evaluation of the previous strategy, objectives, targets and indicators had been included in the draft Action Plan. However, the choice of them was in most instances questionable, e.g., the targets did not measure the impact, but only the processes and activities, even though the titles of the objectives referred to an impact. The Commission stressed the importance of getting this right for the credibility of the NDPHS as a deliverer of results rather than a forum for discussion. Furthermore, regarding the AMR, a closer collaboration with the animal health sector would be needed. The SWG Chair agreed that appropriate indicators had to be found. In response, Sweden and the NCD EG Chair

reminded that measuring the impact was very difficult and the targets the Partnership sets for itself should be realistic and take into account the available resources.

Russia announced that it would submit written comments on the current draft of the Action Plan, after the document had been translated into Russian language. As a general comment regarding the document, Russia noted that in some cases it was not clear how the proposed activities would help to achieve the defined problems.

Having thoroughly discussed the matter, including the written comments submitted by Estonia, Sweden and WHO Europe, the Meeting **agreed** on the following revisions and additions:

- Accepted the changes and agreed to address the comments submitted by Estonia in document CSR 24/5.2/2;
- Accepted the changes and agreed to address the comments submitted by WHO Europe in document CSR 24/5.2/3;
- Accepted the changes and agreed to address the comments submitted by Sweden in document CSR 24/5.2/4, except:
  - The new bullet point proposed on page 3 (only first part, ending with “...the Northern Dimension area” shall be accepted);
  - The final version of the revised Objective 3, which shall be agreed upon between the NCD EG and Sweden);
  - Delete reference to Denmark on page 15, in the view of the Denmark’s request to be removed from the NDPHS mailing list;
- Mandated the SWG Chair and the Secretariat to work together to revise section 1.3. (Horizontal actions);
- Agreed to revise Objective 1 consistent with the changes and additions agreed upon in the previous agenda item.

Furthermore, the Meeting:

- **Thanked** Finland for agreeing to extend the support for the employment of the SWG Chair, which would allow the latter to continue her work until the Action Plan is finalized;
- **Mandated** the SWG Chair, assisted by the Strategy Consultant and the Secretariat, and with involvement of the Expert and Task Groups, as appropriate, to revise the draft Action Plan consistent with the comments expressed during and after the CSR meeting, preferably by 30 April 2015, and send the revised document to the CSR for final comments within two weeks through a written procedure. Subsequently, the finalized draft Action Plan will be circulated for adoption through a written silent procedure.

## **6. Future NDPHS expert-level structures**

With reference to document CSR 24/6/1, the Secretariat introduced a proposed process and aspects to take into consideration when setting up new and reforming the current NDPHS expert-level structures.

Germany proposed to use the existing ToR as a template for the new ones. However, a major problem was that there was no agreement regarding the set-up of the future NDPHS expert-level structures.

Russia announced its readiness to take part in the EGTOR process; however, it would have no resources to assume the leadership of the process.

Sweden proposed, instead of developing separate ToR for each Expert Group, to develop generic ToR, which would apply to all expert-level structures and refer to the NDPHS Action Plan. It would then be the responsibility of each Expert Group to determine the scope of its work and responsibilities vis-à-vis the Action Plan.

Norway supported the proposal of Sweden, as well as suggested replacing the last bullet point in chapter 3 (page 5) with “The current NDPHS expert-level structures will be consulted on the draft generic ToR.” The practicalities of the proposed process shall be included in the timeline.

Further, in response to Finland’s request to the NDPHS countries to provide updates regarding their willingness to lead future NDPHS expert-level structures:

- Finland confirmed its readiness to lead (i.e. provide a Chair and an ITA) two groups: HIV/AIDS&AI and OSH;
- Norway confirmed its readiness to lead a group on ASA;
- Russia confirmed its interest in leading an NCD group as of beginning of 2016; it informed it had to await for the final decision, which is expected to be taken in April 2015;
- Germany confirmed its interest in leading a group on prison health; Germany also had to await for the final decision;
- Sweden informed that it was awaiting the final political endorsement to lead an AMR group. Following a question of the Chair, Sweden further clarified that it was considering co-chairing or providing some sort of support to a group that would deal with the primary health care.

Germany and the SWG Chair reminded that a decision had to be taken on whether in the future there should still be a division between Expert and Task Groups.

Further, the SWG Chair noted that the CSR would need to decide on the specific groups’ responsibilities with regard to achieving the results listed in the Action Plan.

The NCD EG Chair noted that his contract would expire as of the end of April 2015 and the NCD EG ITA’s funding had already ceased in December 2014, therefore, the work of the current NCD EG would be discontinued, unless other proper arrangements were put in place.

Having thoroughly discussed the matter, the Meeting:

- **Agreed** to prolong the mandates of the existing Expert and Task Groups until the CSR decides on the new set-up of the NDPHS expert-level structures;
- **Agreed** to establish an *ad hoc* EGTOR 2015 working group to develop generic ToR for the future expert-level structures and **invited** the Partners to inform the Secretariat about nominations to the EGTOR 2015 until 4 May 2015;
- **Adopted** the ToR of the EGTOR 2015 (cf. Annex 1 to the meeting minutes) with the following changes:
  - To replace the last bullet point in chapter 3 of Annex 1 (page 5) with “The current NDPHS expert-level structures will be consulted on the draft generic ToR” and reflect this revision in the timeline;
  - To reflect the fact that the ToR should be generic and not specific to each group in the outputs (page 5) and the timeline (page 6);
  - To replace the sentence “The group shall be chaired by [PARTNER NAME]” with “The group will elect its Chair.”

## 7. Monitoring of and reporting on the NDPHS progress

### 7.1 Expert and Task Group achievements in 2010-2013

The Secretariat introduced document CSR 24/7.1/1 summarizing the achievements of the Expert and Task Groups in 2010-2013 and informed about a mistake on page 4, done while compiling the document. The mistake had been corrected between the first upload of the document on Friday, 27 March and Monday, 30 March, at the request of the ASA EG: in the first version, in Annex 3 (page 4) the words “in the long-term perspective” were missing from the last sentence.

At the request of the Chair, the Secretariat presented the correct version of the sentence “This strategy means that the result of those activities is not immediately evident within 1-2 years, but will have an impact in long-term perspective.”

The Secretariat also mentioned, with reference to the second sentence in the statement “*The ASA EG has managed to secure funds from the Norwegian government in order to facilitate the start of the flagship project on “Alcohol and Drug prevention among the youth”. This made it possible later to obtain additional funds from the ENPI and EU, and to continue the implementation of the project,*” that from the perspective of the Secretariat (in its capacity as the Lead Partner of the ADPY project funded from the EU), this statement was misleading, as those were two parallel projects implemented under the ADPY and one was not the result of the other.

The ASA EG Chair disagreed with the statement of the NDPHS Secretariat, that ASA EG document contained misleading information. He noted that the ADPY project originated from an initiative of the Swedish government, however, financing was not available for implementing the whole project and therefore the Norwegian government was approached and had provided the funding necessary to start the project, while giving opportunity to the project partners to continue its work in developing the second project proposal.

The Chair invited the ASA EG and the Secretariat to clarify the matter bilaterally.

Estonia thanked the Expert Groups for submitting the documents; it noted that the documents would be very useful for providing a quick overview of the Partnership’s recent achievements. It further suggested to put the achievement reports up on the NDPHS website in each group’s respective section.

Russia requested to reopen the Russian language version of the NDPHS website and announced it would monitor the website and provide the translation of all information and documents to be published, as deemed necessary.

The Meeting took note of the presented information and **requested** the Expert and Task Groups to publish the achievement reports in their respective sections of the NDPHS website.

Furthermore, the Meeting **agreed** that the Russian language version of the NDPHS website would be reopened, with an understanding that all information and documents would be provided by Russia, as deemed necessary.

### 7.2 Approval of the NDPHS Progress report for 2014

With reference to document CSR 24/7.2/1, the Secretariat introduced the general part of the NDPHS Progress Report for 2014 and the Expert Groups reported on their main activities and achievements in 2014, in addition to developing inputs for the NDPHS Strategy 2020 and its Action Plan.

The SWG Chair raised the issue of making Expert Group publications more visible on the NDPHS website. Estonia and the NCD EG Chair supported this idea.

The Meeting took note of the provided information, **approved** the NDPHS Progress report for 2014 and **mandated** the Secretariat to post it on the NDPHS website.

## **8. NDPHS Health Policy Coordinator role in the EUSBSR Action Plan**

### **8.1 Updating of the Health Policy Area section in the EUSBSR Action Plan**

The Commission provided an update on the review process of the EUSBSR Action Plan, thanked the NDPHS for respecting the deadline for submission of inputs and informed that the revised Action Plan was planned to be presented and approved during the EUSBSR Annual Forum to be held on 15-16 June 2015 in Jūrmala, Latvia.

With reference to document CSR 24/8.1/1, the Secretariat informed about the state of affairs regarding submitted update of the Health Policy Area section in the EUSBSR Action Plan, as well as requested the Meeting's guidance on whether:

- 1) The NDPHS would retain its proposal regarding the health-related targets and indicators for the EUSBSR developed during 2012-2013 and submitted to DG REGIO in 2013 or
- 2) The NDPHS will revisit the issue of the health-related targets and indicators in the EUSBSR Action Plan, and submit a revised/new indicator(s) and target(s).

Finland and Sweden thanked the EU for keeping the Health Policy Area in the EUSBSR Action Plan and appreciated the fact that all Policy Areas had been given an equal status.

Finland and Estonia expressed support for retaining the PYLL indicator, as submitted to DG REGIO in 2013. Estonia suggested asking the NCD EG for possible support in case it had to be updated.

Sweden supported retaining the PYLL indicator, noting that in the present circumstances there was no other realistic approach.

Norway stated that it was ready to approve the use of the PYLL indicator, provided that it was in line with WHO indicators.

The ASA EG Chair gave a short background for the development of including measuring morbidity by WHO. To have a better view of the burden of disease, WHO wanted a measurement not only based on mortality statistics. WHO is now basing its measurements on both mortality statistics and disability adjusted life years (DALY) where one adds too early death and years with disability. This is now the standard measuring method by WHO, and is used by The Global Burden of Disease Project.

The Commission noted that the proposed PYLL indicator served the purpose very well.

The Meeting considered the presented information and **agreed** to retain the NDPHS proposal regarding the health-related targets and indicators for the EUSBSR developed during 2012-2013 and submitted to DG REGIO in 2013.

## **8.2 Procedure for issuing letters of commitment to projects applying for Interreg Baltic Sea Region Programme 2014-2020**

With reference to document CSR 24/8.2/1, the Secretariat introduced a “Draft NDPHS procedure for issuing letters of commitment to projects applying for Interreg Baltic Sea Region Programme 2014-2020.”

Norway thanked the Secretariat for taking into account all its suggested revisions to the template letter of commitment provided in January. Regarding the process of issuing the letters of commitment, it requested to add in item 3.d. a phrase “with its recommendation that the letter of support should be issued,” to clarify that the Secretariat’s responsibility to provide a clear recommendation regarding issuing the letter.

The Secretariat stressed that, whereas it would have no problem with issuing a recommendation as suggested by Norway, given that the Secretariat’s expertise covered areas related to project management it would have to rely on the Expert Groups when it comes to the substance of a given project. Further, the Commission and the Secretariat explained that it was for the CSR to make a decision on whether or not the support letter should be issued, while the Secretariat could only give advice.

Norway replied that it understood that it is the CSR that takes the decision, but that Norway was not ready to approve a letter of commitment without a clear recommendation from the Secretariat.

The Secretariat stated that it should give its recommendation on *whether* a letter of commitment should be issued.

Norway replied that it saw no use in receiving applications for considerations that were not recommended. It would only agree to a letter of commitment provided that there was a clear cut recommendation made by the Secretariat.

The ASA EG ITA expressed his concern towards the proposed timeframe, noting that the suggested timeframe did not leave enough time for the Expert and Task Groups to review the application, while putting the responsibility on the results/outcomes of the future project on the shoulders of EG and TGs. The PPHS EG Chair added that in such a short time only the Chair and ITA of a group, but not all of its members, could be consulted. Norway proposed to shorten the CSR decision time to one week to give the groups more time.

Germany responded that project calls were usually open for not more than two months and Germany expected that experts would only have to say whether the project has a potential to become a flagship project or not.

Russia noted that for the time being it had no objections regarding the proposed procedure, however, it would like to revert to the issue after finalization of the formalities regarding Russia’s participation in the Interreg Baltic Sea Region Programme 2014-2020.

*The adoption of the “NDPHS procedure for issuing letters of commitment to projects applying for Interreg Baltic Sea Region Programme 2014-2020” is postponed until the CSR 25 meeting.*

### **8.3 Other matters**

The Secretariat informed that, following decision taken during the 4<sup>th</sup> Meeting of the Parties on the establishment of the NDPHS Secretariat, it had submitted an application to the Interreg Baltic Sea Region Programme 2014-2020 for Policy Area Coordinator support. The decision was expected to be taken in early May. The total support of about 100 000 EUR would secure financing for, *inter alia*, a series of activities to strengthen the project-to-policy cycle and increase the profile of health and social well-being on the regional agenda, as well as employment of a Project Assistant for 12 months.

Further, the Secretariat informed that a workshop was going to be organized during the EUSBSR Annual Forum in Jūrmala, Latvia, on 16 June 2015, entitled “Innovations and cross-boarder infrastructure for a better health care.” This event was planned and organized by both NDPHS structures and external partners with support of the NDPHS Secretariat. To that end, the Secretariat suggested to formally label it as an NDPHS event, which would increase the visibility of the Partnership, especially in its role as the Health Policy Area Coordinator.

The Meeting took note of the presented information and **agreed** to label the workshop “Innovations and cross-boarder infrastructure for a better health care” a NDPHS event.

## **9. Recommendations from the NDPHS evaluation process relating to issues other than the development of the NDPHS Strategy 2020**

### **9.1 Promotion of the Health in All Policies approach within the Partner Countries’ governments concerning the NDPHS’ work**

The Partner Countries **agreed** that the Evaluation recommendation No. 36 “Partner Countries should try to promote the Health in All Policies approach within their governments also concerning the NDPHS’ work” was sufficiently addressed through the integration of the Health in all Policies approach in the NDPHS Strategy 2020.

### **9.2 Further strengthening the NDPHS’ relations with other relevant actors in the region**

Finland underlined the importance of further strengthening the NDPHS’ relations with other relevant actors in the region and avoiding duplications of efforts and welcomed the NCM’s involvement in the NDPHS’ work.

Sweden encouraged efforts aimed at ensuring participation of key regional stakeholders in the forthcoming ministerial-level PAC and, especially, its side-event, which should not be conducted as closed Partnership’s events.

EEAS noted that the previous ND Ministerial meeting called to work for a more systematic approach and more coherence with the actors in the region, both the Baltic Sea region and Barents Euro-Arctic region, and mentioned with appreciation that the NDPHS had been an exemplary format in that respect and encouraged continued efforts in this field.

The Meeting **agreed** that the Evaluation recommendation No. 37 “Further strengthen the NDPHS’ relations with other relevant actors in the region” was sufficiently addressed in the new NDPHS Strategy 2020 and its accompanying Action Plan, and should be kept in mind during the revision of the Horizontal actions section in the draft Action Plan.

### **9.3 Developing new approaches for future collaboration within the NDPHS**

With reference to documents CSR 24/9.3/1 and CSR 24/9.3/Info 1, Germany presented the SWG’s proposal on how to address the Evaluation recommendation No. 38 “Develop new approaches for future collaboration within the NDPHS, in order to maximize the benefits and added value of the cooperation within the network.”

Finland requested that the issue of strengthened communication between the NDPHS expert-level structures be taken into account when developing the new ToR. Furthermore, in the future, reports of the groups should also cover information on how the cross-cutting issues had been covered by the groups’ activities.

Russia suggested that, in order to ensure commitment and continuity of the work of the Expert and Task Groups, organizations rather than individual experts should be appointed as members. The ASA EG Chair recognized the benefits of the proposal, noting that the institutional backing of an Expert Group member in some cases was vital. Germany emphasized that the ideas described in the two documents were not meant to be formalized, but should serve as an inspiration. Also, under the current structures and processes there were no obstacles to nominating institution instead of individuals, as suggested by Russia.

The SWG Chair reminded of the funding available from the NCM not only for study visits of officials between the Nordic countries, but also for some project-related activities.

The Meeting took note of the presented information and **agreed** that a better use should be made of the new approaches for cooperation presented during the meeting, without attempting to formalize these new approaches.

### **9.4 Ensuring that the relevant results from the Expert Groups’ work are conveyed to the policy level**

With reference to document CSR 24/9.4/1, the SWG Chair presented the SWG’s proposal on how to address the Evaluation recommendation No. 40 “Develop new approaches to ensure that the relevant results and recommendations from the Expert Groups’ work are conveyed to the policy level, both within the NDPHS and nationally, and taken into account in policy development processes.”

Norway expressed appreciation that its input had been used as a source when preparing the document and asked for its input to be annexed to the document.

Russia noted that results of the ASA EG had been used for the development of national legislation, which was the background for the suggestion presented during the previous agenda sub-item to institutionalize the membership in expert-level structures to ensure that the results of the expert-level work are conveyed to the policy level.

Estonia mentioned with appreciation the ImPrim project as an example of a project, which was very successful in Estonia and influenced national procedures, as well as the ASA EG support in preparing the national green paper on alcohol. It also supported improving communication between CSR and EG members within countries.

The Commission informed about possibly available funds for meetings and high-level events: 1,5 million EUR would be available, covering the whole region, including the Black Sea and all ND Partnerships. Furthermore, a forecast of the funding needs for 2016 should be produced in August 2015 and in this context it was important that the NDPHS indicated its funding needs.

Having thoroughly discussed the issue, the Meeting:

- **Decided** that the Norwegian input to the document should be included as an annex to document CSR 24/9.4/1;
- **Agreed** that a better use should be made of the suggestions presented during the meeting regarding the approaches for ensuring that the relevant results from the Expert Groups' work are conveyed to the policy level;
- **Mandated** the Secretariat, together with Expert and Task Groups, to indicate to DG NEAR the NDPHS' needs for funding opportunities in 2015 and 2016.

### **9.5 Definition of a “NDPHS project”**

With reference to document CSR 24/9.5/1 the Secretariat presented the SWG's proposal regarding definition of various types of projects vis-à-vis which the NDPHS plays a role, following the Evaluation recommendation No. 42 “Define what a NDPHS Project is.”

Invited to elaborate on footnote No. 2, Russia, explained that it was linked to the definition of a NDPHS project and whenever the project was attributed to the Partnership, there should be a respective CSR decision. Regarding footnote No. 3, Russia explained that it would not be logical for the Partnership to spend resources on developing a project, but not implementing it.

Norway noted that the approximately 2 million EUR provided by Norway through the NDPHS Project Pipeline annually had no place in the presented proposal. Consequently, Norway would have to consider disconnecting its funding from the NDPHS pipeline.

Regarding the proposal of Russia in footnote No. 3, Norway noted that it was fine with the proposed wording, but considered that, if adopted, it would make it very unlikely for projects to get approval to be labeled as NDPHS-facilitated projects because most projects are initiated by expert groups or others, and we cannot expect them to obtain a prior approval by the CSR before any type of project they plan to start formulate. Neither can the CSR be expected to have an opinion on this detailed level.

Germany thanked Norway for providing funding through the NDPHS Project Pipeline and noted that, since Norway was the only donor using this mechanism, there would be no need for a Secretariat-hosted Project Pipeline in the future should Norway decide to disconnect from it.

The SWG Chair noted that the proposal was not addressing the issue of funding sources and, therefore, asked for further clarification regarding the statement of Norway.

Norway clarified that according to the proposed definitions the projects funded through the Pipeline could not be seen as the NDPHS or the NDPHS-facilitated projects. As most of the

applicants considered that they were applying for a NDPHS funding, Norway had to consider how to deal with this situation in order to avoid any misunderstanding with the future projects. Norway had asked in previous CSR meetings that the Norwegian funding channeled through the NDPHS Project Pipeline should be reflected in the proposal on the definition of the NDPHS projects, however, it was not the case.

The Meeting took note of the presented SWG's proposal and **agreed** to postpone the decision until the next CSR meeting.

## **9.6 Roles of and expectations from the various NDPHS actors**

With reference to document CSR 24/9.6/Info 1, the SWG Chair presented a proposal on how to address the Evaluation recommendation No. 43 to "Look into the roles of and expectations from the various NDPHS actors, including the experts, the Secretariat, the Committee of Senior Representatives and the Partnership Annual Conference." During her presentation, the SWG Chair highlighted that the Chair of the HIV/AIDS&AI EG had been invited to prepare a discussion paper and the SWG had had a few short discussion rounds. During this process, the Secretariat had submitted rather thorough comments, which had not been reflected in the document CSR 24/9.6/Info 1. The SWG Chair therefore suggested to regard the document CSR 24/9.6/Info 1 as a background document, especially when preparing the ToR for the Expert Groups in the future. While the paper reflected the views of the Expert Groups and not the SWG as a whole, it contained valuable ideas that should be taken into account.

Germany noted that the document was presenting the views and expectations of the Expert Groups and, therefore, encouraged the CSR members to get acquainted with the document. This could contribute to reducing the gap between the political and expert level in the Partnership, which had been highlighted as an issue during the Partnership's evaluation in 2013.

The ASA EG ITA noted that when the two Expert Groups' representatives in the SWG were developing the document, it had been shared with him. Since the Secretariat had an opportunity to comment on it, the Expert Groups and their members should be given the same opportunity. It was a very important document in the light of the development of new strategy and accompanying it action plan. As a result, the document should be taken into account not only when developing the Terms of Reference of the Expert Groups, but also when discussing the Secretariat's Terms of Reference.

The SWG Chair responded that the Secretariat's, the SWG Chair's and other SWG members' comments on the paper could be shared if necessary, however, she reminded that the SWG had ceased to exist and the only outstanding task was to finalize the Strategy and its Action Plan, thus she could not give an advice on who could further elaborate the discussion paper and whether there was a need for it. It would be very valuable to try to find out what are the expectations of the experts from the NDPHS, however, it would require a new consultation process which, judging from the experience gained from the deliberations within the SWG, could take a year and a half to complete. Finally, the SWG Chair concluded that "taking into account" might be a too strong wording in the present circumstances, and therefore suggested that the paper could be used as a "background paper" in the process of development of the ToR of the expert-level structures.

The NCD EG Chair noted that one could also elaborate on expectations from the members of the Expert Groups.

The Meeting **agreed** that the document CSR 24/9.6/Info 1 would be used as a background paper, which could be taken into consideration, for example, when developing the new Terms of Reference of the Expert and Task Groups.

## **10. Preparations for forthcoming PAC and its side-event**

### **10.1 PAC 11**

Germany, which will host the ministerial-level PAC 11, informed that the meeting would take place on 20 November 2015 in either Berlin or Potsdam. The ministerial dinner will be held on 19 November 2015.

Norway asked Germany to send a formal invitation letter, which would be useful for securing a ministerial-level participation. Russia supported the Norwegian suggestion.

The Meeting took note of the presented information and **invited** Germany to make sure all relevant regional actors would be invited to the PAC and its side event, and to send formal invitation letters promptly.

### **10.2 PAC 11 side-event**

Germany informed that the PAC side-event to address the issue of antimicrobial resistance was planned in cooperation with the AMR TG, to be held in the Robert Koch Institute in Berlin on 19 November 2015. Furthermore, Germany had been approached by the OSH TG Chair, proposing to organize a PAC side-event with a focus on the occupational safety and health. While the initiative was highly appreciated, due to the late submission, it was not possible to take this concept into account. However, it might be used during the subsequent PAC.

Finland proposed that the event proposed by the OSH TG could be held during the Safety 2016 conference to be held in September 2016 in Tampere, Finland. Moreover, Finland announced a request from the OSH TG Chair that the OSH TG would like to take the opportunity to distribute to the CSR the first draft of the updated “Health at Work” strategy for informal comments. The draft would be subsequently revised according to the comments received and formally presented to the CSR meeting.

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

### **10.3 Future NDPHS Chair and Co-Chair**

Germany thanked the NDPHS Co-Chair, Estonia, for excellent co-operation.

While confirming its willingness to chair the Partnership during the next term, Estonia informed about its discussions with Latvia, which had preliminarily signaled its readiness to become the next co-Chair, however, the official decision would be made in September 2015.

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

## 11. Future CSR meetings

Sweden, which will host the CSR 25 meeting, informed that the meeting will take place in Stockholm and tentative dates for the meeting are 21-22 October 2015.

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

## 12. Any other business

Sweden reminded that the Partnership's efforts during the EUSBSR Annual Forum to be held in Jūrmala, Latvia on 15-16 June 2015 should be streamlined through sharing all relevant information with the Partners before the meeting. Sweden also requested the Secretariat to make its e-mail communication easier to process by including deadlines and requested actions into the headlines of the emails.

Ms Outi Karvonen announced that it was her last NDPHS meeting after eight years of engagement with the Partnership. She thanked the Secretariat, the Expert and Task Groups, the Finnish Ministry of Health and Social Affairs and the HIV/AIDS&AI EG Chair for their support and cooperation.

Mr Mikko Vienonen announced that it was his last NDPHS meeting and thanked everyone for productive cooperation since 1999. He wished the Partnership success and many years to come.

The Meeting **thanked** Ms Karvonen, Mr Vienonen and Ms Anttila for their excellent work and wished them all the best for the future.

Russia informed that there had been a misunderstanding in the past during the development process of the INTEGBALT project when Russian experts were not allowed to participate in the expert-level discussions regarding the project proposal after it became clear that Russia was not eligible for the funding to be applied for. While it was inevitable that different financing agencies had different rules, the NDPHS projects should be discussed with equal involvement of all Partners and within the framework of the Partnership, and only the funding issue should be treated as a separate matter. If necessary, a document could be developed to further define the procedures and aspects to be taken into account.

Russia and the Secretariat informed of their availability to cooperate on the issue in order to develop and present an acceptable solution.

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

## 13. Adoption of the CSR 24 meeting minutes

The Meeting **agreed** that the Secretariat will send out draft CSR 24 meeting minutes to the participants on 30 April 2015 and that comments on the draft will be due, at the latest, on 5 May 2015. The revised minutes will be distributed on 7 May 2015 to be adopted *per capsulam* provided that no further comments are submitted within one week.

## 14. Closing of the meeting

The Chair thanked the participants for a fruitful meeting and the Commission for hosting it.

The Commission congratulated the CSR on a fruitful meeting.

The Meeting terminated on 16 April 2015 at 13:15 hours.