

**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	PH 3/Info 4
Title	minutes from the 11 th meeting of the NDPHS Committee of Senior Representatives
Submitted by	Lead Partner Norway
List of Annexes	Annex 1 – List of participants Annex 2 – List of documents submitted to the meeting Annex 3 – Adopted Rules of procedure for approval of new NDPHS Partners and NDPHS Associated Expert Groups Annex 4 – Adopted Terms of Reference for the Expert Group on Prison Health Annex 5 – Adopted elements for NDPHS EG annual progress reports Annex 6 – Adopted NDPHS <u>preliminary</u> budget for FY 2008 together with explanatory remarks
Summary / Note	These minutes present the most important information and statements presented, as well as, where available, the conclusions and decisions made during the meeting.

1. Opening of the meeting and welcome

The meeting was opened by Mr. Viktoras Meižis, the NDPHS CSR Chair, who also chaired the meeting. The Host Country, Poland welcomed the participants.

2. Adoption of the Agenda

Denmark asked when the 2008 evaluation of the Partnership would be discussed, as it was not mentioned as an agenda item.

The Chair informed that CSR 12 will discuss the 2008 evaluation.

The Meeting **adopted** the agenda as submitted in document CSR 11/2/1.

3. Information by the NDPHS Chair and the NDPHS Secretariat

3.1 Past and forthcoming meetings of special relevance to the NDPHS

The Chair informed about past meetings of relevance to the NDPHS, which he attended together with the Secretariat, since the CSR 10 meeting:

- Conference on Nordic Cooperation and the Northern Dimension, organized by the NCM Finnish Presidency on 17 January 2007 in Hanasaari, Finland, where he also held an informal discussion with the Russian Deputy Minister of Foreign Affairs, Mr. Aleksandr Grushko and other Members of the Russian delegation. Mr. Grushko informed that Mr. Andrey Avetisyan would be the Russian focal point for the Northern Dimension policy-related issues;

- During the above meeting, the Chair also held informal discussions with (i) the new Secretary General of the Nordic Council of Ministers, Mr. Halldór Ásgrímsson, who expressed his interest in NDPHS and NCM joint activities, as well as (ii) Mr. Arne Grove, the Director of the recently established NCM Information Office in Kaliningrad, to investigate how the NDPHS could benefit from cooperating with his office;
- A meeting with Mr. Tapani Piha, Head of the Health Measures Unit in the EC's Health and Consumer Protection Directorate on 31 January 2007 in Brussels. During that meeting the EC committed to be more actively involved in the NDPHS including, but not limited to the EG work. Also, the ways were discussed how funding for the Partnership could be sought through EC grant mechanisms;¹
- A Joint Session of the CBSS CSO and the European Commission on 1 February 2007, in Brussels;
- The Baltic Sea States Sub-regional Co-operation (BSSSC) Board meeting on 9 March 2007 in Kaunas, to introduce the NDPHS to the Members of the Board. The Meeting discussed the possibility to join the NDPHS and agreed to decide upon it in April 2007;
- The EG Chairs and ITAs meeting on 26 February 2006 in Vilnius;
- A meeting in Vilnius on 27 February 2007 in which the Chair and Co-chair countries as well as the Secretariat participated and discussed the steps to initiate the preparations for the forthcoming NDPHS PAC, as well as preparations for the CSR 11 Meeting;

As to the forthcoming meetings of importance to the NDPHS, these include in particular the forthcoming meeting of the Northern Dimension Steering Group to be held in June 2007 in Brussels to which the two Partnerships, namely the NDPHS and the NDEP will be invited.

Following on the Chair's information, the Secretariat informed that, as regards the period until the end of February 2007, it took part in the meetings listed in the Secretariat's progress report (submitted as document CSR 11/3.2/Info 1). As regards March 2007, it took part in:

- A seminar on trafficking in Human Beings organized by BSSSC (taking the opportunity of attending the above-mentioned BSSSC Board meeting);
- A seminar in Madrid on the renewed Northern Dimension, co-organized by the Spanish and Estonian Ministries of Foreign Affairs, where it also held informal talks regarding a possible involvement of Spain in the NDPHS activities;
- A meeting of the CBSS Task Force on Trafficking in Human Beings, on 22 March 2007 in Berlin, which discussed the possibility of joining the NDPHS as an Associated EG. The Task Force decided to postpone its final decision until its next meeting.

Upon the invitation of the Chair, the CBSS reported on the Parliamentary Conference on the new Northern Dimension Policy (cf. document CSR 11/3.1/info 1), held on 28 February - 1 March in Brussels and informed that the Northern Dimension Framework Document and its Policy Agreement were rapidly spreading in the European Parliament. CBSS concluded that the idea of working together in Partnerships took a good road and that, nonetheless, further advocacy of the NDPHS was necessary to promote the NDPHS.

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

¹ At this point in the meeting, the EC added that efforts were underway to mobilize EC colleagues from other units to participate in NDPHS EG meetings and that there may soon be an appointment for the SIHLWA EG.

3.2 Secretariat's progress report

The Meeting **took note** of the Secretariat's progress report for the period from September 2006 until February 2007 (submitted as document CSR 11/3.2/Info 1) and additional explanatory details regarding Secretariat's informal discussions with the Parliamentary State Secretary of the German Ministry of Social Affairs, as well as its participation in the Task Force on Trafficking in Human Beings.

With reference to the information in the progress report that Mr. Pavel Semenov, who was formerly seconded to the NDPHS by the NCM, had left the NCM Office in St. Petersburg, the NCM informed that they were in the active process of advertising the vacancy and hoped to finalize the selection process in early May 2007. NCM further stated that the newly recruited person, which would be part-time seconded to the NDPHS, would mainly focus on the cooperation with Russia.

The Meeting **took note** of this information.

4. Information by the NDPHS Partners

Finland informed that the Finnish NCM presidency had organized a conference on Nordic Cooperation and the Northern Dimension in Hanasaari, Finland on 17 January 2007. Based on the Presidency's objectives, Finland will strive to make Nordic co-operation more effective, to improve the opportunities for citizens to have influence and to awaken interest in Nordic co-operation. The Finnish Ministry of Health will also organize a seminar on prevention of drugs in the Barents region in Levi, Finland, 12-13 April 2007. It further informed about the concluding seminar of the Murmansk HIV/AIDS project, planned for October 2007, where future projects would also be discussed. The Finnish NCM Presidency would be concluded with a conference on promotion of healthy lifestyles and prevention of non-communicable diseases in St. Petersburg 11-12 December 2007, where not only the NCM governmental Partners, but also the business community will be invited. The event will be co-organized by the SIHLWA Expert Group.

Denmark informed about the forthcoming "stop trafficking camp" to be held on 18-20 April 2007 in Copenhagen, addressing social aspects in trafficking. The camp is an EU initiative which was started in Dec 2006. Its purpose is to identify main issues in trafficking and to fighting the social problems of trafficking.

Sweden reported on the Conference "Reducing Alcohol Problems in the Baltic Sea Region: Effective approaches to tackle alcohol related problems in local communities," which was held on 12-13 March in Riga, Latvia with the co-operation of SIHLWA, the WHO and Latvia. Besides approximately 50 participants from the NDPHS Partner countries, also Slovenia attended the conference as it planned to address alcohol as a main topic in its upcoming EU presidency. Sweden informed that the Coordinator of the SIHLWA Expert Group was currently compiling the Conference report which is to be published at the NDPHS website and can be circulated to the CSR members upon request.

Norway informed that it is using the Project Pipeline for applications to its grant scheme for co-operation projects with Russia. The Barents Working Group on Health and Related Social Issues which is co-chaired by Norway and Murmansk, will have its next meeting in Oslo on June 4.-5. Among the issues on the agenda will be a new cooperation programme, a new initiative targeted at youth and children at risk, and the Barents HIV/AIDS programme. The Steering Committee of the HIV/AIDS programme was to have its next meeting in Helsinki following the CSR meeting. In its discussion of future work, it has been proposed that the committee should associate to the Partnerships EG on HIV/AIDS.

Germany gave a brief update on the recently held HIV/AIDS Conference on “responsibility and Partnership – together against HIV/AIDS”, 13 March 2007 in Bremen. The German Chancellor expressed her desire that HIV/AIDS be discussed in the forthcoming EU summit as well as the G8 summit, in order to draw the attention of this pandemic to all key decision makers present there. The Conference was also attended by the HIV/AIDS EG members. The final Conference Declaration expressed *inter alia* commitment to provide the political leadership on a national, European and international level to fight this pandemic and to co-operate to ensure access to affordable medication.

France informed that it was about to sign a new umbrella agreement 2008-2013 with the WHO, focusing on support of treatment in HIV projects in the Baltic region and on a health support programme 2007-2009 for Eastern Europe.

The EC reiterated that the Northern Dimension was in the focus of the EU, and this was further reinforced since the adoption of the new ND policy by the first ever ND summit in November 2006. The two existing Partnerships were recognized as a suitable means for cooperation and the ND Steering Group had now decided to invite the two Partnerships to the next meeting in Brussels, in June 2006, which indicated a growing importance of the NDPHS. The Commission considered to include public health in the future EU-Russia Partnership agreement, as it was absent for the time being. The EC further considered establishing a separate Public Health Dialogue. Three main areas of cooperation were identified, namely: non-communicable disease prevention; infectious diseases, particularly in relation to HIV/AIDS, tuberculosis and pandemic flu preparedness, and implementation of the International Health Regulations; and a debate on the concept of health in all policies.

Other activities of the current EC-cooperation included: consultation on policy options for organ transplantations; consultations regarding community action on health services; open discussion on operational aspects of the EU health strategy; think tank on HIV/AIDS in EU and neighboring countries and; the forthcoming Alcohol and Health Forum (in June 2007). An NDPHS participation in the Alcohol and Health Forum would be most appreciated.

The EC further stated that the main mechanism for the realization of the EU public health policy was through the projects co-financed from the Community programme for action in public health. A recent call for proposals was published in February 2007 (deadline 21 May), including action strands on health information, health threats and health determinants. The EC believed that the NDPHS can greatly contribute to the EU debate and the realization of the EU health policy in the Region, as NDPHS could also shape the policies of the EU with their representatives. A major focus needed to be put on the bilateral relations between EU and Russia and the multilateral cooperation of the NDPHS, to develop synergies, which could produce the added value for the entire European population.

Poland added that each country has an EC focal point which could provide more information on how to apply to the EC funding mechanisms.

The NCM reported on the recently held BSSSC meeting on trafficking in Kaunas, on 8 March 2007 and stressed the importance of working together on this issue and not duplicating efforts. Another meeting on trafficking in human beings was held on 16 March in Vienna, organized by the OECD with the objective of finding synergies. NCM further reported on activities in Russia, where several projects on children at risks and trafficking were being implemented with the support of NGOs. An exchange programme was set up to enable civil servants to travel to Baltic cities and Russia and vice versa and better learn the views and approaches on trafficking.

The CBSS stressed that there was a need to stay focused on the Northern Dimension area and that efforts should not be duplicated.

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

5. Rules of procedure for approval of new NDPHS Partners and NDPHS Associated Expert Groups

The Secretariat informed that there were yet no comprehensive rules of procedure developed for approval of new NDPHS Partners, Participants and NDPHS associated Expert Groups. However, there was the possibility that the BSSSC as well as the CBSS Task Force for Trafficking in Human Beings might soon apply for a Partner and an Associated Expert Group status, respectively. Therefore, as reiterated by the Chair and Co-Chair, the Secretariat developed draft Rules of procedure (submitted as document CSR 11/5/1)

The Meeting discussed the draft rules and **adopted** them with minor amendments, as provided in Annex 3. The Meeting further **agreed** that these rules of procedures would come into force on the day of the adoption of the Minutes.

6. Legal capacity of the NDPHS Secretariat

Sweden recalled that during its 10th meeting, the CSR had agreed on the timeline and steps to get the legal capacity authorized to the NDPHS Secretariat. This procedure was based on a two step approach, the first being a unanimous agreement from all Partners to the ToRs and the latter an exchange of letters on a ministerial level to gain legal capacity for the Secretariat. Following this, Sweden subsequently distributed revised NDPHS Secretariat ToRs. The procedure was broken by Canada, which did not take part in CSR 10 and had now made new proposals to the proposed ToR text. Sweden informed that the broken procedure aimed at establishing an international secretariat, whereas Canada was now proposing the establishing of a national entity under the Swedish law. Both countries' lawyers were involved in a dialogue and it was hoped that a suitable solution could be found, but there was no conclusive response from either side, yet.

Canada stated that it had not been clear for Canada whether the aim was (i) to establish an international legal personality through a treaty and if so, a lengthy domestic process would have to take place or (ii) to have the Secretariat obtain legal status domestically, in accordance with Swedish law. It was Canada's impression that the current draft ToR appeared to meld these two approaches. Canada emphasized that it cannot provide a final position at this meeting yet as the discussions are still continuing with Sweden. Canada also inquired whether an exchange of letters between Health Ministers would constitute a legally binding document in other Partner countries.

Germany reiterated that it could not take part in the exchange of letters as this would constitute a legal capacity, and the German Ministry of Health was not authorized to assume such an international obligation. It reiterated that its preferred solution was to link the NDPHS to an established organization, e.g. WHO or the CBSS. However, Germany understands at the same time that other countries may have objections to this procedure.

Denmark strongly emphasized the immediate need for a legal capacity of the Secretariat to be established be it international or domestic, as well as the need for a solution that would allow France, Germany Russia and Canada to become full Partners of the Partnership.

Sweden reiterated that the CSR 10 had agreed to establish the legal capacity through an exchange of letters. Whilst the discussions between Sweden and Canada had not been finalized yet, it was nonetheless considered important by all Partners to provide the Secretariat with a legal capacity. The exchange of letters was the only agreeable solution found during the last CSR meeting. Sweden, therefore, suggested to promptly continue the discussions with Canada. If the discussions resulted in a change of the ToRs, Sweden proposed to send the

newly revised ToRs to the Partners in a new silent procedure as quickly as possible. If not, Sweden proposed to continue and go ahead with the exchange of letters.

Canada reaffirmed that it would do its best to proceed as quickly as possible and find an agreeable solution.

The Chairman of the CBSS stated that the CBSS was looking forward to a final solution in order to pass this obstacle. As the procedure would not be finalized by 5 April, it meant for the CBSS to take another decision concerning the extension of the NDPHS as a temporary project within the CBSS, and the CBSS Chair reiterated that he will once again suggest to the CSO that the NDPHS Secretariat could continue as a temporary project of the CBSS. He concluded by underlining that it was now high time that the Partnership passed the test of its legal capacity as this cloud may cover the good work the NDPHS is producing.

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

7. Progress report on the NDPHS Database Project

The Secretariat informed that all but one Database project Partner, three Expert Groups as well as the EC were present at the 1st Meeting of the Database Project Steering Group (DPSG) which took place on 27 March 2007, immediately before the CSR 11 Meeting.

The DPSG had assigned all relevant responsibilities for the respective work packages. The Secretariat further informed that the ToR for the Steering Group were discussed and had been adopted with the changes suggested. Most notably, the project pipeline had already become operational. The Norwegian Ministry of Health was now using the pipeline tool to receive project proposals. As a next step, the Secretariat asked the Partners to provide information about financing agency focal points for their respective countries and organizations, latest by 13 April, so that the pipeline could be made available also to agencies other than the Norwegian financing agency. Furthermore the Public Health Executive Agency had sent a grant agreement which will be signed by the Secretariat after consultations with the Project Associated Partners.

Concerning the latter, Poland stressed that it could pay its financial contribution to the database project, only once the PHEA agreement was signed.

The Meeting **agreed** that Partners would provide to the Secretariat information about financing agency focal points latest by 13 April 2007. As to the financial contributions to the Database project, the respective contributing Partners are invited to pay their contributions as soon as it is legally and technically possible for them.

8. Expert Groups – progress so far and future activities

8.1 Expert Group on HIV/AIDS

The HIV/AIDS EG Chair informed that the EG was monitoring around 30 projects with an approximately 5.5 million EUR funding in the field of HIV/AIDS, which provided insight that for example, the newly detected HIV infections were still numerous (highest incidence in NW Russia and Estonia). The MSM-related infections were more and more on rise in the West, while incidence and prevalence of IDU-associated HIV has remained at low levels in the Nordic countries, Germany and Poland. He further pointed out that the 20-24 year olds in the Baltic countries had the highest numbers of HIV infection (approx 1250 registered cases, while the same age group in Nordic countries had low numbers of infection (below 250 registered cases),

while the picture was reversed for the +40 years olds (over 500 HIV cases in the Nordic countries, less than 250 in the Baltic countries).

The next meeting will be held in Portugal with a specific theme on HIV among migrant populations. The meeting will also address the new HIV/AIDS EG working programme (policy paper) which was currently under revision. The EG's priorities included the initiation of new projects and the active extension of the EG Partners network. In this regard, discussions were underway with Barents, to include the Barents HIV/AIDS activities as a new subgroup in order to provide a better focus and support for the Russian regions.

The HIV/AIDS EG stated that the regional focus in activities should be kept and more harmonized approaches for prevention, treatment and care should be established. It identified a clear need to enhance recruitment of new, innovative projects and turn successful ones to sustained action. In view of the economic changes, increased EU Membership and the shift from a donor/recipient to a Partner-project financing relationship a new situation had emerged, to which the Partnership may need to respond. The HIV/AIDS EG felt that without "specific" support, regional projects would compete at equal level with project proposals from within EU in general, which may not have a Nordic or regional focus.

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

8.2 Expert Group on Primary Health Care

The PHC EG Chair recalled that the PHC EG's ToRs were adopted by CSR 9 in Paris. During its 3rd meeting that took place on 22-23 February 2007 in Cracow, Poland, the EG had elaborated a more detailed action plan for 2007, which defined four working areas, namely:

- The development of a framework for the PH EG;
- The production of thematic reports and situation analysis;
- The planning, implementation and monitoring of projects;
- PHC EG contribution to the NDPHS database and project pipeline activities.

The areas of action include health promotion and disease prevention, development of PHC structures, data collection from PHC, the analysis of the implication of demographic changes in the area of PHC, etc. The Expert Group stressed that an ITA may be in place in a couple of weeks. The EG decided to also have task managers who would manage specific tasks related to PHC.

The PHC EG concluded by stating that it had a WHO representative from WHO Moscow in its group. The WHO experience helped in identifying the work already done in the above mentioned four working areas.

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

8.3 Expert Group on Prison Health

The PH EG Chair informed the Meeting that she was elected the Chair of the Expert Group during the recent meeting held on 13-14 February 2007. Substantive information about several ongoing activities and projects in the area of prison health was provided during that meeting, including a Norwegian project in Russia (WINNING) as well as an interregional WHO project, which gave a clear overview about the situation in prisons, based on WHO's statistical data. The group was currently collecting project information in order to gain a comprehensive overview of all ongoing activities and was currently drafting its 2008 action plan. The Terms of Reference were agreed upon (submitted as document CSRE 11/8.3/1) and the Expert Group's priority areas were identified. The EG will among several things focus on vulnerable groups in

prison, including women, mothers and their children and young people. Further, the group intended to put an emphasis on prevention and rehabilitation activities.

It was noted that prison health activities were closely related to communicable diseases, children at risk, drug and alcohol problems and psychiatric disorders. Prisons can be breeding grounds for communicable diseases. Tuberculosis, for example, is in some places 100 times more prevalent inside than outside the prisons. Infected persons in prisons give rise to big concerns. Statistics from some Finnish prisons show that 50% of the inmates were infected with hepatitis C. In this regard the PH EG stressed that the group had common points of interest with the Expert Groups on Primary Health Care and HIV/AIDS. The group has decided to invite members of the other Expert Groups to its forthcoming meetings, in order to encourage information exchange and closer cooperation.

One of the most pressing needs for the EG was to recruit an ITA, for which Norway has provided funding.

France informed that the next Prison Health meeting will be held in Paris, 18-19 June 2007.

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

The Secretariat introduced the PH EG ToRs which it had developed and which were agreed upon by the PH EG during its last meeting on 13-14 February in Norway.

The Meeting **adopted** the PH EG ToRs as proposed by the PH EG (enclosed as Annex 4).

8.4 Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability

The SIHLWA EG Chair presented the EG's quarterly report which contained focal point information of the Lead and Co-lead Partners, the subgroups as well as the overall participations of NDPHS Partners in meetings and projects. Currently three major projects enjoy active Partner support:

- The occupational safety and health project in N-W Russia (ILO, Russian Federation and Finland);
- The soon starting Alcohol and drug prevention project among youth (NCM, Russian Federation, Finland and Sweden); and
- The hazardous and harmful use of alcohol project, which is in the planning stage.

The SIHLWA EG co-sponsored and provided technical support to the implementation of the CBSS International Conference "Reducing Alcohol Problems in the Baltic Sea Region," organized in Riga Latvia 12-13 March 2007. It also plans to organize a NDPHS workshop at the European Public Health Association (EUPHA) Annual Conference in October in Helsinki and would, besides other activities also support the NCM/Finnish Chairmanship conference on promotion of healthy lifestyles and prevention of non-communicable diseases in St. Petersburg 11-12 December 2007. The 4th SIHLWA Expert Group Meeting is going to be held on 29-30 May in Helsinki, Finland.

The SIHLWA EG further informed that it aimed at conducting a proper stakeholder analysis; however funding may be an issue. Concerning future activities, SIHLWA questioned if the NDPHS would want to have different kind of projects. As the ND was thinking of setting up new Partnerships for transport and energy, such projects could focus on energy renovation of hospitals or prisons, for instance and could make NDPHS projects bankable, as well.

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

8.5 Conclusions and summarizing discussion

The Secretariat reported on the main conclusions of the 4th meeting of the NDPHS EG Chairs and ITAs, which took place on 26 February 2007 in Vilnius and was hosted by the Lithuanian Ministry of Health. Expert Group Chairs expressed their request for Partners' increased involvement in the NDPHS Expert Groups and ensuring their proper representation in the EGs. They further appreciated the idea of nominating Co-lead Partners for Expert Groups. All Expert Groups had started their work in the respective key areas identified. The Chairs and ITAs meeting had agreed that the Expert Groups would produce their annual progress reports for 2007 and their work plans for 2008 to be presented to the 12th CSR meeting and also produce a policy paper, describing the Expert Groups' respective areas of actions and formulating recommendations for future actions in the NDPHS area. They had also agreed to hold back-to-back meetings whenever possible and further stimulate the exchange of knowledge and expertise amongst the Expert Groups. The next EG Chairs and ITAs meeting is planned to be held in September 2007.

Sweden appreciated the progress made by the Expert Groups and suggested to present these achievements of the Expert Groups as well as other NDPHS activities in a small info sheet or brochure about the Partnership. Short Expert Group reports would better show the value of the Partnership and its potential for development.

The Secretariat informed that there were two types of reports that the Partnership would produce, namely, progress reports and thematic reports, and that they would be prepared by the Expert Groups in the framework of the Database project. The project offers funds to produce info documents and thematic reports (the latter will identify the challenges and proposed policy responses, which could also be included in the proposed brochure). As the Secretariat will soon embark on developing the contents for a new website, it will be in close contact with the EGs to obtain up to date information about their activities. In the process of developing a new website contents, the Secretariat will also use the info document about the NDPHS EGs, which it developed together with the EGs a few months ago and submitted to the recently held EG Chairs and ITAs meeting. All these sources of information will provide a good basis for the development of the suggested brochure. Finally, the Secretariat plans to update and further improve PowerPoint presentation it produced last year, which will also be posted on the new website.

CBSS, Denmark and Finland supported the Swedish proposal, reiterating that a small brochure about the Partnership would promote concreteness and advocate the NDPHS beyond its current level of familiarity.

The Meeting **agreed** that the Secretariat would prepare a basic information sheet on the Expert Group activities, based on their quarterly and thematic reports, update the NDPHS PowerPoint presentation and, with the help of and input from the Expert Groups, compile a draft brochure that would be circulated to the Partners for comments before being publicized.

The Expert Groups on HIV/AIDS and SHILWA reiterated that the concept of a Co-lead Partner would support them in their work and ensure a certain degree of sustainability for the Expert group. One aspect could be that as person from the Co-lead country could also act as Co-chair of the EG, another could be that administrative matters could be taken care of by the Co-Lead Partner. At the same time it could be a valuable experience for a country to act as Co-lead Partner to get acquainted with the tasks that it may require to work within the structure of the Expert Group network.

The Prison Health EG reiterated that co-chairing may have also implications beyond the scope of the Expert Groups and that therefore, it should not only be up to the Expert Groups to find that Co-Lead Partner alone.

The Meeting **took note** of the distribution of Partners' leadership and co-leadership functions, as well as overall participation in Expert Groups, as listed in Annex 1 and Annex 2 of the document entitled "Ensuring successful work of the NDPHS Expert Groups, (submitted as document CSR 11/8.5/1).

The Secretariat brought to the CSR's attention the concern raised during the 4th Chairs and ITA meeting that many projects and funding sources for the Expert Groups were about to expire and that certain funding schemes required seed money from within the Expert Groups or the Partnership.

Sweden reiterated that the Secretariat was the only body with a legal capacity that could submit project proposals, but that the Expert Groups would need to provide sufficient content. It further suggested that EGs could contact UNAIDS or the EU Health Programme in order to apply to the respective grant schemes.

The EC strongly encouraged NDPHS applications for grants of the programme of Community action in public health. An annual work plan defines the major needs and actions for implementation and co-financing from the programme. Closer cooperation between NDPHS members and PHEA and EC may better synchronize NDPHS actions with the EU policies in health and future NDPHS projects may bring more EC co-financing to the regional actions and provide the added value in the ND cooperation. One way forward could be to invite the PHEA to the next CSR or EG Chairs and ITAs meeting to present the rules and procedures, applicable for receiving funding. Furthermore, DG Sanco was currently organizing info days in Member countries and a similar kind of meeting could be organized for NDPHS Partners.

NCM stated that it could participate in partnerships, but that it was unable to finance other organizations, such as the NDPHS Secretariat.

The Chair summed up the discussion and recalled that the Oslo Declaration foresaw financing on a national, bilateral, and multilateral basis, including multilateral financing through a Partnership's Voluntary Fund.

The Meeting **agreed** that the Partnership should work proactively towards achieving the objectives stipulated in the ND Policy Framework document, and **took note** of the discussions on Expert Group Co-lead Partners and financial project support.

The Secretariat then introduced EG progress reporting elements (submitted as document CSR 11/8.5/2).

The CBSS proposed to change the order of the reporting elements, starting with conclusions and recommendations, so that the key content of the reports would be provided at the beginning of the document.

The meeting **adopted** the document entitled "Elements for NDPHS EGs' annual progress report" with the changes proposed by the CBSS (attached as Annex 5).

9. Preparations for the next PAC at the ministerial level

9.1 Date and place of the next PAC

The Chair recalled that, as announced in his letter of 8 March 2007 distributed to the Partners, the next PAC would be held on 16 November 2007 in Vilnius, Lithuania. The exact location would be communicated through the Secretariat at a later point in time after the CSR had decided about the side events.

The Meeting **took note** of the information provided by Lithuania.

9.2 Main issues for the PAC agenda

9.3 Possible side events

9.4 Summarizing discussion¹

The Chair, speaking on behalf of Lithuania proposed occupational safety and health (OSH) as the main topic for the PAC agenda, in view of the good progress of the SIHLWA subgroup on OSH and the willingness of WHO (workers health) and ILO to significantly contribute to the event. However, as OSH was often a shared responsibility between the Ministries of Health and the Ministries of Labor, it would require a strong focus on health-related issues. He also remarked that the proposed subject was informally consulted with several Partner Countries.

SIHLWA EG stressed that a PAC theme on occupational safety and health provided many possibilities in the areas of health and regional cooperation, as many important internationally adopted documents could be used as basis for the PAC discussions, e.g.:

- The WHO Global Strategy for Occupational Health for all, which urged all Partners, including those of the NDPHS to devise national programmes on occupational health for all workers. Furthermore, the WHO urged Member States to strengthen collaboration with ILO and to stimulate joint regional efforts on workers' health;
- The WHO's (draft) Global Plan of Action on Workers' Health 2008-2017;
- The ILO's new International Convention No 187 on the Promotional Framework for Occupational Safety and Health, 2006;
- The ILO's Global Strategy on Occupational Safety and Health, 2003;
- The new EU Strategy on Health and Safety at Work 2007-2012;
- The new EU Health Programme 2007-2012.

HIV/AIDS EG suggested having a broad working title in order to be able to address all important needs, for example mentioning the words "OSH and vulnerable groups", so that migrant populations could also be included in the PAC theme. It preferred one single side event and not may different ones, with a focus on the economic impact, a health promotion, migrant populations, etc. The HIV/AIDS EG proposed a first outline of five key note lectures, being:

- OSH in promoting healthy lifestyles (ILO);
- Drug and Alcohol problems in the workplace (SIHLWA);
- Prevention of infections diseases in OSH (PHC);
- OSH and migrant populations (trafficking);
- Economic impact of health promotion.

The IOM and the PHC EG supported the HIV/AIDS EG proposal while Poland supported the idea to only have one broader side event.

¹ These three agenda sub-items were discussed together.

NCM suggested that the national action plans against trafficking indicated which Ministries were in charge of trafficking and that the national action plans could help identifying trafficking topics related to public health.

The EC, Sweden and Germany expressed the need to put OSH in the context of health and that this required a title with a strong health message in order to ensure the participation of the Ministers of Health.

Norway agreed that OSH is an important issue, and supported the comments made by the HIV/AIDS and SIHLWA EG, the EC, Poland, Sweden and Germany. It stressed that it however was important for the partnership to stick to its core issues, and reminded about the fact that OSH as a theme can make it difficult to attract ministers to the PAC, as OSH in several countries, Norway included, was not a responsibility of the Minister of Health. It further suggested holding EG meetings in connection with the PAC.

Denmark expressed concerns about focusing too much on OSH and felt that communicable diseases were also high on the agenda, but didn't want to oppose a decision in favor for OSH.

The Chair reiterated the need to ensure a high-level representation for PAC from the respective Partner countries, as he had already mentioned in his letter sent to all Partners on 08 March 2007.

The Secretariat considered that the thematic reports produced by the Expert Groups could be a good product for PAC.

The EGs on HIV/AIDS and SIHLWA stressed that the reports should be short and crisp and not overemphasize the EG activities.

The Meeting **agreed** that the main topic for PAC will be occupational safety and health, with broad health content and a title, which would ensure the representation of the Ministries of Health. There will only be one PAC side event. Moreover, it was **agreed** that the Chair will develop the Conference and side event titles as well as the main Conference topics and would circulate them to the Partners for comments. The final Conference document will be "Conclusions by the Chair," in accordance with the Oslo Declaration.

10. Financial matters

10.1. Statement of accounts and audit report for the FY 2006

The Secretariat introduced the Statement of accounts of the NDPHS Secretariat for the FY 2006 (submitted as document CSR 11/10.1/Info 1). This statement presented the amount of income and the actual expenditures and was accompanied by an explanatory memorandum.

Further, the Secretariat explained that the CSR 11 meeting took place before the Swedish State Audit Office is ready with their statement from an external audit of the FY 2006 accounts of the CBSS Secretariat,¹ the Secretariat was unable to submit this statement.

The Meeting **considered** the Statement of accounts of the NDPHS Secretariat for the FY 2006 and **discharged** those accountable from responsibility with regard to the implementation of the NDPHS budget in FY 2006 on the condition that statement from an external audit of the FY 2006 accounts of the CBSS Secretariat to be made by the Swedish State Audit Office, was

¹ This audit covered also the NDPHS Secretariat as an administrative unit of the CBSS Secretariat.

positive as regards the NDPHS accounts. To that end it requested the Secretariat to communicate the statement to the Partners as soon as it was made available to it.¹

Finally, the Meeting **agreed** that the to-be-expected savings in 2007 would be moved to the Appropriations Account.

10.2 Appropriations Account

The Secretariat recalled that it had earmarked 9,303 EUR to be transferred from the NDPHS Appropriations Account to the Ministry of Health of the Republic of Lithuania for the employment of the Database Project Main Expert who will be assisting the Secretariat in the management of this project. Further, it recalled that, having regard to that France and Russia had informed that they might have difficulties in contributing their shares to the NDPHS budget for FY 2007, CSR 10 had authorized the Secretariat to use funds in the NDPHS Appropriations Account to cover possible deficit in the main budget, if necessary.

Further, while recalling that an Appropriations Account could be used as a source for providing project seed money for EG activities, the Secretariat requested the Partners to do their utmost to provide their contributions.

Sweden stated that the Appropriations Account should not be used to balance out deficits that were caused by countries not paying their contributions.

Canada stated that their contribution for 2006 was now approved and in the process of being paid. However, as long as the legal status was an open issue, Canada was not in the position to discuss financing issues.

The Meeting **took note** of the above statements and **agreed** that the contribution to be paid by Canada for 2006 would also be moved to the Appropriations Account, once received by the Secretariat.

10.3 NDPHS budget for FY 2008

The Secretariat introduced a draft budget covering expected contributions and expenditures of the NDPHS Secretariat during FY 2008 (submitted as document CSR 11/10.3/1). Further, referring to a request from Denmark, the Secretariat presented additional figures of the current 2007 year budget for a better comparison of the present and the future financial situation.

The Chair reiterated that Partners should ensure that the annual contributions to the NDPHS be well anchored in the Partners' national budgets.

Canada reiterated that it could not discuss any future financial commitments as long as the NDPHS Secretariat's legal capacity was not clarified.

Norway raised concerns that a draft budget proposal could not be adopted before the Norwegian national budget 2008 was approved by their Parliament.

Denmark noted that the budget could not be adopted, as Canada was not in a position to discuss it. Partners should nonetheless ensure that the amount of each Partners contribution was paid in 2008 to the NDPHS Secretariat.

¹ As requested, this report was distributed to the Partners on 24 April 2007 together with the adopted minutes from the 11th meeting of the NDPHS Committee of Senior Representatives.

Poland requested an official document emerging from the CSR that could be handed in for the Polish national budget approval procedure.

France considered it a draft budget, as the French contributions were not yet earmarked in its national budget.

The Secretariat expressed concern that the budget had limited room for maneuvering and that missing contributions would have an impact on certain services, the Secretariat is supposed to provide.

The Meeting **adopted** the discussed draft budget as a preliminary budget, **agreed** that all Partners would earmark their respective contributions, and **asked** the Secretariat to submit a final draft version to the next CSR meeting for approval.

11. Next CSR meeting

Russia informed that it was considering organizing the next CSR meeting in Kaliningrad in the first half of October 2007 and that it would provide more detailed information to the Secretariat upon return of the NDPHS delegation to Moscow.

The Meeting **thanked** Russia for its offer and **requested** the Secretariat to communicate the information about the proposed date and place if and when it is made available.

12. Any other business

No topics were discussed under this agenda item.

13. Adoption of the CSR 11 Meeting minutes

The Secretariat proposed that it would send out draft CSR 11 Meeting minutes to participants on 5 April 2007 and that comments on the draft would be due, at the latest, on 12 April 2007. A revised report would then be distributed on 13 April 2007 to be adopted *per capsulam* provided that no further comments are submitted within one week.

The Meeting **agreed** to the Secretariat's proposal.

14. Closing of the Meeting

The Meeting closed at 15.30h.

**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	Annex 1 to the minutes
Title	List of participants
Summary / Note	This list includes participants who participated in the Meeting

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**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	Annex 2 to the minutes
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 11/2/1	Provisional agenda with timetable	Secretariat	02/03/07
• CSR 11/2/2	Provisional annotated agenda	Secretariat	02/03/07
• CSR 11/3.1/Info 1	Statement of the Parliamentary Conference on the Northern Dimension	Secretariat	20/03/07
• CSR 11/3.2/Info 1	Secretariat's progress Report	Secretariat	02/03/07
• CSR 11/5/1	Rules of procedure for approval of new NDPHS Partners and Participants, and NDPHS Associated Expert Groups	Secretariat	20/03/07
• CSR 11/8.3/1	Proposed Terms of Reference for the EG on PH	Secretariat	02/03/07
• CSR 11/8.5/1	Ensuring successful work of the NDPHS Expert Groups	Secretariat	20/03/07
• CSR 11/8.5/1/Rev. 1	Ensuring successful work of the NDPHS Expert Groups (revised paper)	Secretariat	23/03/07
• CSR 11/8.5/2	Elements for NDPHS EGs' annual progress reports for the CSR	Secretariat	20/03/07
• CSR 11/10.1/Info 1	Statement of accounts of the NDPHS Secretariat for FY 2006	Secretariat	20/03/07
• CSR 11/10.3/1	Draft budget proposal for FY 2008	Secretariat	20/03/07
• CSR 11/11/Info 1	Dates, location and hosts of CSR meetings	Secretariat	02/03/07

Auxiliary documents

Code	Title	Submitted by	Date
• CSR 11/Info 1	Practical information for participants and Registration form	Secretariat	02/03/07

- CSR 11/Info 2 List of documents submitted to the meeting Secretariat 02/03/07
- CSR 11/Info 2/Rev. 1 Revised list of documents submitted to the meeting Secretariat 20/03/07
- CSR 11/Info 2/Rev. 2 Second revised list of documents submitted to the meeting Secretariat 23/03/07
- CSR 11/Info 3 Preliminary timetable Secretariat 20/03/07
- CSR 11/Info 4 Preliminary list of Participants Secretariat 20/03/07
- CSR 11/Info 4/Rev. 1 Revised preliminary list of Participants Secretariat 23/03/07

**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	Annex 3 to the minutes
Title	Rules of procedure for approval of new NDPHS Partners and NDPHS Associated Expert Groups
Summary / Note	These Rules of procedures will come into force on the day of the adoption of the Minutes

Rules of procedure for approval of new NDPHS Partners and Participants

Adopted at the 11th Meeting of the NDPHS CSR
in Warsaw, Poland, on 27-28 March 2007

In accordance with the *Declaration concerning the establishment of a NDPHS* adopted in Oslo on 27 October 2003, NDPHS eligible Partners are “the Founding Partners, EU Member States and Northern Dimension Partner Countries, the European Commission and other relevant EU Institutions, regional co-operation bodies, international organisations and financing institutions. Eligible participants are interested sub-national administrative entities in the Northern Dimension area. Other countries or organisations associated with the Northern Dimension may become Partners or Participants of the Partnership in accordance with national legislation or statutes and through a procedure to be established by the Committee of Senior Representatives.”

Countries and international organizations, which meet the corresponding conditions spelled out above, and are willing, able, and pledge to substantially contribute toward the objectives and aims of the *Declaration concerning the establishment of a NDPHS* through participation in the NDPHS meetings, projects and other activities, are welcome to apply for a Partner or a Participant status with the NDPHS. When applying, the following procedure will be adhered to:

1. The applicant country or organization will submit its letter of application, through the NDPHS Secretariat, to the NDPHS Committee of Senior Representatives (CSR).

If the applicant is an international organization, it will additionally provide information explicitly validating the following:

- A long-term commitment to promoting sustainable development in the Northern Dimension area through improving human health and social well-being;
- A competence relevant to the NDPHS;
- Its international character (an organization will be deemed international in its character if it has members, branches or affiliated bodies in at least five countries);
- That it is authorized by its founding agreement to represent and speak for its members through its representatives.

2. If the application meets the above criteria, the Head of the NDPHS Secretariat will, in agreement with the CSR Chair, forward the application to the forthcoming CSR Meeting for decision.

3. If the application does not meet the above criteria, the Head of the Secretariat will, on behalf of the CSR Chair, inform the applicant about any possible requested revisions. After any necessary revisions are made by the applicant and the revised application is accepted by the CSR Chair, the Head of the Secretariat will forward the application to the forthcoming CSR Meeting for decision.

4. The CSR Chair will invite the applicant country or organization to attend the said CSR Meeting to enable the applicant to more broadly introduce ideas for its participation in and contribution to the NDPHS before the CSR takes decision.

5. Notwithstanding the above, in order to expedite the decision-making process, the CSR Chair may decide that the Head of the NDPHS Secretariat will forward the application to the CSR for decision through a written (silent) procedure.

6. The Head of Secretariat will, on behalf of the CSR Chair, inform the applicant in writing about the decision taken by the CSR.

These rules of procedure will be amended by the CSR when deemed necessary.

Rules of procedure for approval of new NDPHS Associated Expert Groups

Adopted at the 11th Meeting of the NDPHS CSR
in Warsaw, Poland, on 27-28 March 2007

In accordance with the *Declaration concerning the establishment of a NDPHS* adopted in Oslo on 27 October 2003, "In case a relevant expert group or network already exists within the Northern Dimension area, the CSR may invite that group or network to function also as an expert group under this Partnership, in accordance with its original mandate and the objectives of the Partnership."

I. When the CSR decides to invite a relevant expert group or network to function also as an NDPHS Associated Expert Group, the following procedure will be adhered to:

1. The CSR Chairman will send a letter of invitation to the respective expert group or network explaining the reasons for the CSR to invite it to function under the NDPHS and what such a function involves. This letter will also be forwarded to the CSR Contact Persons for information.
2. After the CSR Chairman receives response to his/her letter, the Head of the NDPHS Secretariat will forward it to the CSR Contact Persons for information (together with the CSR Chair's remarks, if the latter wishes so).

II. When a relevant expert group or network, which already exists within the Northern Dimension area, would like to function also as an expert group under the NDPHS, it will be invited to adhere to the following procedure:

1. The expert group or network will submit its letter of application, through the NDPHS Secretariat, to the NDPHS Committee of Senior Representatives (CSR). At least the following will be validated in the letter:

- A long-term commitment to promoting sustainable development in the Northern Dimension area through improving human health and social well-being;
- A competence relevant to the NDPHS;
- That it is actively working in the Northern Dimension area as well as is willing, able, and pledges to substantially contribute toward the objectives and aims of the *Declaration concerning the establishment of a NDPHS*;
- That it opens its network for participation of the NDPHS Partners and invites them to take part on equal footing with its own members in its meetings, projects and other activities of relevance to the NDPHS;
- Its international character;
- That it is authorized by its founding agreement to represent and speak for its members through its representatives.

2. If the application meets the above criteria, the Head of the NDPHS Secretariat will, in agreement with the CSR Chair, forward the application to the forthcoming CSR Meeting for decision.

3. If the application does not meet the above criteria, the Head of the Secretariat will, on behalf of the CSR Chair, inform the applicant about any possible requested revisions. After any necessary revisions are made by the applicant and the revised application is accepted by the CSR Chair, the Head of the Secretariat will forward the application to the forthcoming CSR Meeting for decision.

4. The CSR Chair will invite the applicant to attend the said CSR Meeting to enable the applicant to more broadly introduce ideas for its participation in and contribution to the NDPHS before the CSR takes decision.

5. Notwithstanding the above, in order to expedite the decision-making process, the CSR Chair may decide that the Head of the NDPHS Secretariat will forward the application to the CSR for decision through a written (silent) procedure.

6. The Head of Secretariat will, on behalf of the CSR Chair, inform the applicant expert group or network in writing about the decision taken by the CSR.

These rules of procedure will be amended by the CSR when deemed necessary.

**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	Annex 4 to the minutes
Title	Adopted Terms of Reference for the Expert Group on Prison Health
Summary / Note	-

TERMS OF REFERENCE

NDPHS Expert Group on Prison Health

Adopted at the 11th Meeting of the NDPHS CSR
in Warsaw, Poland, on 27-28 March 2007

I. Background and Rationale

Within the Northern Dimension area the penal system presents a section of the society where major health problems are concentrated. The spread of communicable diseases occurs predominantly within the marginalised groups that live under harsh socio-economic circumstances, of which many members may subsequently enter the penal system. There are also obvious connections between social disparities, mental disorders, drug use, infectious diseases, crime and imprisonment. Thus, it is necessary to extend the scope of joint work concerning penal systems in the Northern Dimension area to cover not only communicable diseases but also better treatment and prevention of psychiatric diseases, the rehabilitation and treatment of drug abusers, improved custodial conditions for inmates and staff and strengthened co-operation between the prison system and the civil and social services.

In order to achieve these objectives, the Northern Dimension Partnership in Public Health and Social Well-being (NDPHS) recognises that improvements in the living conditions of prisons need to be made as well as the working conditions of prison staff. There is also need to offer proper education or work to prisoners, especially in the case of young prisoners. Measures to assist penal institutions in attaining a higher degree of self-sufficiency should be made, and projects that foster co-operative relations between the prison system and the social services system, as well as relevant organisations, local authorities and civil society as a whole.

Thus, pursuant to the following provision for the Committee of Senior Representatives (CSR) as spelled out in the "Declaration Concerning the Establishment of a Northern Dimension Partnership in Public Health and Social Well-being," adopted by the Ministerial Meeting in Oslo, Norway, on 27 October 2003:

- "In order to carry out its tasks, the Committee of Senior Representatives may establish expert groups, consisting of experts from interested Partners and Participants and other international experts, as appropriate,"

the CSR decided at its 3rd meeting in Copenhagen on 20-21 September 2004 to establish the NDPHS Expert Group (EG) on Prison Health.

II. Objectives

According to the Mandate of the PHC Expert Group given by the Partnership, the main role of the EG on Prison Health is to act as the focal point for national inputs from the Partner Countries and Organisations. In this capacity, the EG on Prison Health has the overall objective to work towards the improvement of prison systems and prison reforms, and to promote networking and Partnership building among relevant stakeholders.

III. Scope of Responsibilities

According to the abovementioned Oslo Declaration, and the EG's Mandate, under the guidance of the CSR, an expert group may have an advisory role and/or provide professional input to the preparation and implementation of joint activities carried out within the framework of the Partnership. Also, the Declaration permits expert groups to "facilitate professional exchanges, increase co-ordination among Partners and Participants and monitor joint activities within their area of expertise."

Consistent with these provisions, the EG on Prison Health has the following scope of responsibilities:

- Promote the principles and objectives of the Partnership in the field of prison health and develop strong Partnerships with a wide variety of stakeholders to ensure that it achieves maximum results;
- Establish and maintain relations within the Partner Countries and Organisations as well as with international and national organisations, and other institutions as appropriate;
- Promote general awareness concerning prison health and work towards the development of positive attitudes towards this field;
- Communicate "collective knowledge" within the field on prison health;
- Contribute to the development of national policies that respond to the needs and requirements of the Partnership Countries;
- Map and identify Partner Countries' needs for technical and financial support to scale-up national programmes, encourage requests for assistance;
- In association with Partners, and with assistance from the NDPHS Secretariat, support efforts to provide technical and other forms of assistance to governmental and national Partners in planning, implementing and monitoring programs to scale up prison health. This will include meeting with authorities, visiting Partner Countries at the request of the CSR, and providing information via correspondence;
- Co-ordinate its activities with other Partnership programmes in areas of mutual interest, as well as with related activities of other international organisations, to avoid the duplication of activities;
- Provide feedback and report on progress to the CSR, and provide the NDPHS Secretariat with updated information, when appropriate;
- Other responsibilities, as approved by the CSR or Partnership Annual Conference (PAC).

Within this scope of responsibilities, the EG on Primary Health Care will undertake the following specific activities:

- Establish connections and co-operation with other Partnership Expert Groups;
- Support initiatives for reorienting prison systems to improve the implementation and status of health care;
- Collaborate with other relevant organisations with compatible objectives, especially those working towards healthy life styles and disease prevention and including those from other sectors which have an impact on prison health;

- Provide professional advice and technical support to relevant authorities, such as by meeting with authorities, visiting Partner Countries and through written correspondence;
- Propose topics and issues for new project proposals on prison health;
- In selected cases, act as a technical referee for new project proposals, project identification, planning, implementation and monitoring. This includes making recommendations on project proposals and implementation, as well as assisting in planning, as requested, including in the development of terms of reference for such reviews;
- Monitor and evaluate the results of projects and activities implemented under the Partnership initiative, in order to ensure that financing is allocated in a way that achieves maximum results;
- Assist in initiating, catalyzing, and promoting relevant project initiatives, evaluate and discuss project proposals with project owners and also support ongoing projects in the field of prison health and social well-being in the Northern Dimension area;
- Advise and, if necessary, assist project groups in contacting financiers and recommend relevant project proposals to financial bodies within the Northern Dimension area;
- Formulate criteria for future support for projects in the field of Prison. This should include the application of the Logical Framework Approach (LFA);
- Provide the Partnership website/database with information concerning the Expert Group's work;
- When relevant, review the Expert Group's Terms of Reference and advise on any necessary amendments;

The official language of the Expert Group is English. However, where possible, efforts should be made to provide English/Russian interpretation and translation.

IV. Outputs and Results

The general scope of outputs and results from the work of the Expert Group shall be as follows:

- Oversight of the implementation of strategic objectives defined by the group and approved by the CSR;
- To advise the Partnership through the NDPHS Secretariat on related Partnership activities and proposals for various forms of support;
- To facilitate the exchange of information on programmes and projects;
- To provide expert contributions to policy evaluation;
- To promote Partnership-building and activities relevant to achieving the goals of the Partnership;
- To promote regional synergies and synergies with other international organisations;
- Monitoring and peer evaluation of ongoing activities;
- Short progress reviews/reports submitted to CSR meetings and annual PAC meetings.

V. Lead Partner

The CSR decides upon the Lead Partner for the EG on Prison Health. The role of the Lead Partner is to initiate and lead the Expert Group's activities. The Lead Partner also provides financial support to the Group to prompt its activities.

In the case that a Lead Partner decides to step down, prior to its resignation, it should inform the CSR of its intentions and propose a replacement. Accordingly, the CSR will decide whether to approve the proposed replacement, as appropriate.

VI. Composition of the Expert Group

1. Chair and Vice Chair

The Expert Group appoints its Chair and Vice Chair from the individuals nominated. In doing so, it is responsible for keeping the CSR and the NDPHS Secretariat informed of its decision.

The Chair is responsible for providing effective leadership concerning the Group's overall scope of responsibilities spelled out above. In addition, the Chair is responsible for:

- Ensuring that the EG meets at appropriate intervals, and that the minutes of meetings and any reports to the Partnership bodies accurately record the decisions taken and, where appropriate, the views of individual EG representatives;
- Ensuring that the EG reaches clear conclusions on the matters it discusses;
- Ensuring that the views of the EG are passed to the CSR, PAC and the Secretariat;
- Communicating the EG's views to the media, health care professionals and the public, as requested;
- Briefing new members on appointment, as appropriate.

2. International Technical Advisor

The Lead Partner shall appoint the Expert Group's International Technical Advisor (ITA), subject to the approval of the Group. The ITA is responsible for keeping the CSR and the NDPHS Secretariat informed of the Expert Group's decision.

The ITA's main function is to provide uniformity, support and advice to projects through site visits and collaboration with relevant external bodies in the Programme field. The ITA shall also be actively involved in all of the activities described in the Expert Group's mandate, where appropriate and reasonable. In addition, he or she is responsible for:

- Preparing, in co-operation with the EG Chair and in contact with the Secretariat, provisional meeting agendas, meeting documents, and preparing the minutes from the EG meetings;
- Keeping the representatives of the EG informed on a regular about the progress of projects;
- Maintaining continuous dialogue with the NDPHS Secretariat to ensure the co-ordination of activities within the Partnership;
- Contacting the NDPHS Secretariat regarding the input of the EG to relevant Partnership projects and activities, such as the Project Database and Project Pipeline;
- Developing Partnerships with other individuals and organisations to ensure wide participation in development issues that the Partnership is addressing.

In appointing the Chair, Vice Chair and ITA, it is advisable that they represent different countries from the Northern Dimension area.

3. General Representation

General representation within the EG on Prison Health shall consist of high-level experts in the fields of health (communicable diseases such as TB and HIV and epidemiology, drug abuse and mental disorders), social welfare and prison experts. These high-level experts shall be appointed to the Expert Group by the Partner Countries and Partner Organisations. In appointing representatives to the Group, Partner Countries and Organisations will be guided by the following considerations:

- The EG will include one to two representatives and not more than two alternates from each Partner Country and Organisation, who has an interest and sufficient expertise in the field of Prison Health;
- EG representatives and alternates will normally serve in the Expert Group for a period prescribed by their respective countries or organisations, preferably for a period of at least two years.

If a representative is unable to attend an Expert Group meeting, he or she shall ensure that an alternate is sent.

If a Partner Country or Partner Organisation changes their appointed representative, it should inform the EG Chair, ITA and the NDPHS Secretariat immediately.

In addition to the appointed Partner Country and Partner Organisation representatives, the Expert Group is entitled to invite other “eligible participants” and “interested parties” as defined in the Oslo Declaration. The Chair/ITA of a given Expert Group meeting will inform the appropriate representatives in the Group about any additional invitees prior to the meeting, if possible.

4. Sub-groups

The EG on Prison Health has the right to establish sub-groups to achieve the objectives of the Group, as appropriate. The establishment of a sub-group is subject to the approval of the CSR.

VII. Meetings

The EG on Prison Health shall hold three to four meetings per year. The location of meetings will rotate based on the interest expressed by the Partners.

The Expert Group can organise additional meetings, as considered necessary and appropriate, given the extent of available funding and other relevant resources.

The NDPHS Secretariat has the right to attend, and submit documents to the Expert Group's meetings as well as intervene during these meetings.

Should the Expert Group not be in a position to decide upon additional invitees to its meetings, the Chair may invite persons from international or regional organisations who have an interest in the field of prison health to the EG's meetings or to particular sessions during such meetings.

Except as otherwise herein stated, the Expert Group will determine its own methods of work, including the preparation of agendas, the keeping of records and other procedures. The work of the Expert Group between periodic meetings shall be carried out through correspondence via e-mail and telephone.

VIII. Coordination, supervision and financial aspects

The CSR is responsible for supervising the work of the Expert Group. As to guidance, PAC is responsible for deciding on the political direction of the Group.

For co-ordination purposes, the Chair, Vice Chair and ITA should hold co-ordination meetings with the Secretariat and other Expert Groups' Chairs and ITAs. Such meetings may be organised, if necessary, by the Secretariat when preparing for CSR meetings, and in these cases, would be held back-to-back with the CSR meetings, or as deemed necessary.

As the Partnership cannot bear the travel and other costs related to Expert Group representatives' participation in EG meetings, all expenses incurred by the representatives to attend EG meetings will be covered by their respective countries or organisations.

Notwithstanding the above, individual Partner Countries or organisations may provide voluntary support for the attendance of a participant at Expert Group meetings, if sufficient funds are available.

If other sources are interested in supporting the work of the Group, communication and follow-up will be facilitated by the NDPHS Secretariat.

The Lead Partner shall provide financial support to the Expert Group to aid its activities.

IX. Reporting and Decision Making

The EG on Prison Health is answerable to the CSR and PAC. To this end, it will provide feedback and report to the CSR, as well as PAC, as necessary.

The Expert Group, supported by the Chair and the ITA, will prepare an annual Progress Report and a proposed Activity Plan for the following year, both to be submitted to the Autumn CSR meeting.

In order to ensure proper co-ordination and transparency, all reports and plans will be shared with all Expert Group representatives, the Group's Lead Partner, and the NDPHS Secretariat, which can in turn share the reports with other Partner countries and Partner Organisations.

Decisions within the Expert Group on Prison Health shall be reached by consensus.

Only appointed representatives to the Expert Group take part in decision making.

The outcomes of each Expert Group meeting shall be documented in the meeting minutes and published on the NDPHS website. The Expert Group will ensure that all decisions are communicated to the NDPHS Secretariat and other Partnership bodies, as appropriate, and that the Secretariat will be included as a recipient of all meeting documents and other relevant documents that are circulated to its representatives.

In addition to the existing Terms of Reference, the Expert Group on Prison Health can elaborate more precise strategies and actions plans, which highlight the methods by which the goals and objectives will be reached. These strategies and action plans can be updated at Expert Group meetings, and any changes will be communicated to the NDPHS Secretariat.

X. Relationship with other Expert Groups

The EG on Prison Health shall seek, when appropriate, to establish and maintain collaborative relationships with other Expert Groups on cross-cutting issues.

Additionally, the EG on Prison Health shall seek, when appropriate, to establish and maintain working relations with other relevant groups in the Northern Dimension area in a manner that promotes synergies and avoids the duplication of efforts. To this end, and when appropriate, the Expert Group may represent the Partnership in different forums to promote its objectives and develop support and commitment from potential external Partners.

Examples of cross-cutting issues that the Expert Group may wish to work with other Expert Groups on include, but are not limited to the following:

- Communicable diseases and disease prevention;
- The improvement of health care and social work in prisons;
- Rehabilitation of drug and alcohol abusers;
- Social inclusion and mental health.

XI. Amendments to the Terms of Reference

The Terms of Reference will be reviewed every two years, coinciding with Chairmanship rotation, or on an ad hoc basis, when deemed necessary by the Expert Group.

Proposed amendments to the Terms of Reference shall be co-ordinated with the NDPHS Secretariat and approved through consensus in the Group before being submitted to the CSR for adoption.

**Committee of Senior Representatives (CSR)
Eleventh Meeting
Warsaw, Poland
27-28 March 2007**

Reference	Annex 5 to the minutes
Title	Adopted elements for NDPHS EG annual progress reports
Submitted by	Secretariat
Summary / Note	-

Reporting elements for the NDPHS Expert Groups' progress reports to autumn CSR meetings

Background

Monitoring of and reporting on the progress in the implementation of the NDPHS Expert Group annual work plans is an important CSR's duty. Regular assessments are to provide timely, targeted, relevant and reliable information that is indispensable for the NDPHS decision-making process. This should also help to increase coherence between Expert Groups by identifying, and subsequently assessing, the links between them. Furthermore, it also enables providing complete and up-to-date information during various events as well as to various stakeholders outside the NDPHS.

As provided for in the NDPHS Expert Groups' Terms of Reference, "Expert Group, supported by the Chair and the ITA, will prepare an annual Progress Report and a proposed Activity Plan for the following year, both to be submitted to the autumn CSR meeting." Progress reports from the Expert Groups should (i) take stock of progress, (ii) describe enabling factors and strengths, as well as obstacles and constraints in their work and the way how to address them, (iii) present proposals for resolution by the CSR and/or PAC.

Based on the reports submitted by the NDPHS Expert Groups, the Secretariat shall prepare an overall NDPHS Progress Report for a given year for presentation to the autumn CSR meeting. This report will (i) summarize progress made by the NDPHS Expert Groups, (ii) identify cross-expert group questions of importance (horizontal issues that need to be addressed by the CSR), (iii) analyze obstacles and constraints in moving the whole process forward, and, finally, (iv) present proposals for resolution by the CSR.

Consistent with the above, and to ensure coherent and consistent reporting, each Expert Group is requested to submit to the NDPHS Secretariat in due time before Autumn CSR meeting (preferably one month before it) a progress report that will be prepared according to the following reporting elements. The Expert Groups' progress reports, and the overall progress report to be developed by the Secretariat, will be submitted to the autumn CSR meeting, as appropriate.

Reporting elements

Progress reports from the Expert Groups should be developed in accordance with the following reporting elements:

1. Conclusions and recommendations

Please present lessons learnt and overall conclusions (other than those in the items above) regarding the activities of the Expert Group during the reported year, which you would like to bring to the attention of the NDPHS CSR as well as of the Secretariat when it is preparing an overall (annual) progress report based on all the EGs' progress reports.

Based on the conclusions and lessons learnt, please develop Expert Group's recommendations for the future. Please propose steps and actions to address the obstacles and constraints in the Expert Group's work.

2. Expert Group leadership and coordination

2.1 Lead Partner(s) and Co-Lead Partner(s)

Please list the Lead and Co-Lead Partners of the EG and each of its Sub-groups (if any). If the EG or its Sub-group(s) plan to change the Lead or Co-Lead Partner, please inform of this as well as of who will take over and when the change will take place.

2.2 International Technical Advisor / Coordinator(s) / Task Manager(s)

Please list the ITAs / Coordinator(s) / Task Manager(s) working for the EG and inform if their services are guaranteed also in the future.

2.3 Financial resources for leadership

Please inform if the Lead Partner(s) and Co-lead Partner(s) have ample funding in place for the leadership at present and in the future. This includes funding for managing/leading the EG and employment of persons listed in 1.2 above.

3. Partner participation in Expert Group activities

3.1 Participation of Partners in meetings of the Expert Group and its Sub-group(s) (if any)

Please list the Partners who have nominated their representative to the EG and inform if they take part in meetings of the Expert Group and its Sub-group(s) (if any). If there are Partners, who do not take part in meetings at present, but whose participation is specifically desired considering the scope and character of the EG's meetings, please name them.

3.2. Participation of Partners in EG project-based activities

Please list the Partners who take part in EG project-based activities run by the Expert Group or its Sub-group(s) (if any). If there are Partners, who do not take part in these activities at present, but whose participation is specifically desired considering the scope and character of the EG's projects, please name them.

4. Actions taken to implement the Expert Group's annual Work Plan

Please list the activities planned to be taken, which have been included in the Expert Group's annual Work Plan (please annex the EG's Work Plan to your report), and describe actions taken to implement them (list the EG meetings in this section, too). Please describe how much the Expert Group's activities during the reported year have contributed to the achievement of the group's objectives as spelled out in its Terms of Reference.

5. Other actions taken by the Expert Group (not covered in item 3)

5.1 Project-based activities

For each main project that the EG has completed or is currently running (or was/is actively involved in) please provide the information in accordance with the below specified items. Please do not include projects which are labelled as NDPHS projects, but to which the EG does not provide a meaningful input.¹

- i) Name of the project;
- ii) Project objectives and geographical area;
- iii) Project leader;

¹ The Secretariat proposes that, as soon as the NDPHS will have established its Database, the information requested below will be included in the Database and the Expert Groups will include below a reference and the direct link to the respective project. The following section will then be adjusted by the Secretariat to this new pattern.

- iv) Main project donor(s);
- v) Project time frame;
- vi) Overall conclusions and recommendations for the future.

5.2 Non-project-based activities

Please list other activities that the EG has completed or is currently running (or was/is actively involved in), and which are not project-based.

6. Strengths and opportunities

Please describe enabling factors, strengths and opportunities in the Expert Group's work.

7. Obstacles and weaknesses

Please obstacles, constraints and weaknesses in the Expert Group's work.

8. Other relevant information

Reference	Annex 6 to the minutes
Title	Adopted NDPHS <u>preliminary</u> budget for FY 2008 together with explanatory remarks
Summary / Note	The Meeting decided that the final budget proposal will be submitted for approval to CSR 12

Part I. Foreseen expenditure in Euro, FY 2008

Budget chapter	Monthly	Yearly	Yearly totals
1. Salaries and related costs			277,300
1.1 Salaries (NDPHS staff)	14,750	177,000	
1.2 Social charges and insurances (NDPHS staff)	5,250	63,000	
1.3 Other remunerations (NDPHS staff)	608	7,300	
1.4 Administrative staff costs	2,500	30,000	
2. Meetings, travel and transportation			32,000
2.1 Meetings, travel and transportation (NDPHS staff)	2,083	25,000	
2.2 Organization of meetings within the NDPHS context		2,000	
2.3 Participation of experts in PAC and CSR meetings		5,000	
3. Communications			9,000
3.1 Telephone, fax and internet communications & accessories	542	6,500	
3.2 Local computer network and computer accessories	208	2,500	
4. Office rent			2,800
Part of the office rent/maintenance which is not covered by Host Country Sweden as its in-kind contribution		2,800	
5. Office expenses			4,110
	342	4,110	
6. Postage			684
	57	684	
7. External services			22,875
7.1 Accounting and auditing services		5,408	
7.2 In-house IT support	406	4,867	
7.3 NDPHS website hosting, maintenance and development	217	2,600	
7.4 Other services	833	10,000	
8. Miscellaneous			10,000
	833	10,000	
Total annual expenditure			358,768

NB. Displayed monthly subtotals are rounded.

See the explanatory notes for details regarding the calculation of the foreseen expenditures.

Part II. Annual contributions to the NDPHS budget in Euro, FY 2008

Country	Share	Amount
Regular contributions by the Partner/Associated Partner countries		
Canada	9.5095%	32,025
Denmark	9.5095%	32,025
Estonia	3.6036%	12,136
Finland	9.5095%	32,025
France	9.5095%	32,025
Germany (<i>contribution on a project basis</i>)	9.5095%	32,025
Iceland	3.6036%	12,136
Latvia	3.6036%	12,136
Lithuania	3.6036%	12,136
Norway	9.5095%	32,025
Poland	9.5095%	32,025
Russia	9.5095%	32,025
Sweden	9.5095%	32,025
	TOTAL	
	100.0000 %	336,768
Host country extra contribution		
Sweden		20,000
Other extra income		
Interest on capital		2,000
Total annual contribution		358,768

Part III. Explanatory remarks regarding calculation of the budget

This budget proposal includes costs that are specifically related to the operations of the NDPHS Secretariat, as well as costs that are related to the organization of two meetings within the NDPHS context and the costs of the participation of experts in PAC and CSR meetings. It assumes that the NDPHS Secretariat will have its own legal capacity during the entire year 2008. For this reason, it assumes that certain types of expenditure in certain budget chapters, which are currently shared with the CBSS Secretariat, will be higher than is the case presently.

At the same time, considering that the NDPHS Secretariat had to follow some rules while developing this budget proposal and having in mind that at the moment of developing this document the NDPHS Secretariat is hosted by the CBSS Secretariat, this document has been developed in accordance with the applicable financial rules of the CBSS Secretariat and in cooperation with the CBSS Administration.

Almost all expenditure incurred by the Secretariat is in the Swedish krona (SEK). However, the contributions are paid in EURO. Therefore, when calculating the budget, the Secretariat used the basic figures in SEK and subsequently converted them to EUR at the exchange rate according to Infoeuro Monthly Files for March 2007 (EUR 1 = SEK 9.246) (NB. currency fluctuations are another factor that may influence the final level of expenditures).

1. Salaries and related costs

This budget chapter envisages the following types of costs:

- Full-time employment of the NDPHS staff:
 - 1.1 Salaries and vacation allowances;
 - Head of Secretariat;
 - Senior Adviser.
 - 1.2 Social charges and medical and life insurances;
 - 1.3 Other remunerations (pension, family allowance, foreign allowance).
- 1.4 Purchasing of administrative services. In accordance with previously held considerations, the Secretariat assumed that it would be able to buy from the CBSS Secretariat the same type of services as it enjoys now. The NDPHS Secretariat can not, however, decide about this alone as it is also up to the CBSS Secretariat to agree to this.

2. Meetings, travel and transportation

This budget chapter envisages the following types of costs:

- 2.1 Transportation, accommodation, subsistence, conference fees, etc. in connection with travel of the NDPHS staff (both domestic and abroad);
- 2.2 Conference fees, rent of premises and equipment, meals and miscellaneous – in connection with organization of meetings within the NDPHS context. Two one-day meetings for 15 persons are foreseen. This expenditure may take place in relation to, e.g., the organization of two NDPHS Expert Group Chairs and ITAs meetings;
- 2.3 Participation of experts in PAC and CSR meetings, should the CSR Chair decide to invite external experts to attend a PAC and CSR event.

3. Communications

This budget chapter envisages the following types of costs:

- 3.1 Costs of calls (including subscription costs), fax and data (internet) communications as well as related accessories;
- 3.2 Local computer network servers and computer network accessories, as well as computer services other than IT-support specified under item 7.2 below.

4. Office rent

This budget chapter includes the cost of renting a part of the CBSS Secretariat premises used by the NDPHS Secretariat and some maintenance costs, which the Secretariat has to pay for to the Swedish Government. This rent is partly covered by the Host Country, Sweden as its in-kind contribution, with the remaining cost of SEK 25,000 to be covered by the NDPHS Secretariat in agreement with the CBSS Secretariat.

5. Office expenses

This budget chapter includes costs of insurances and licenses as well office material and equipment – costs of furniture, stationery, subscriptions of magazines and newspapers, and purchase and maintenance of office equipment other than mentioned in item 3.

6. Postage

This budget chapter envisages costs of regular, registered and express postage, as well as the cost of renting a P.O. box for the Secretariat.

7. External services

This budget chapter envisages the following types of costs:

- 7.1 Occasional accounting support provided by an external consultant and annual auditing by the Swedish State Audit Office;
- 7.2 Regular maintenance and periodic upgrading of the server used by the Secretariat and of the local computer network;
- 7.3 NDPHS web site hosting and maintenance, as well as possible minor changes/upgrading of the website;
- 7.4 Other external services not covered by items 7.1 to 7.3 (such provision of legal advice).

8. Miscellaneous

This budget chapter envisages the following types of costs:

- Bank charges;
- Hospitality and representation;
- Training courses;
- Other costs not specified above.