

## ClubEuropa Il Gruppo in prima fila

### EU4Health workprogramme 2023

The European Commission adopted the annual work programme of the **EU 4 Health, born after the COVID-19 pandemic, which** aims to reinforce the European Member States' healthcare systems.

The largest of the EU health programmes address, in particular, health-related urgencies in relation to the COVID-19 pandemic and Russia's unjustified and unprovoked war against Ukraine. Special attention will be given to mental health, global health, and the developments in digital health and medicinal products. The work programme will also address actions to improve the uptake of cancer screening.

Here follow a list of actions with a cost of **20 000 000 euros or more (in the form of grants)**.



#### CRISIS PREPAREDNESS

The aim of the direct grant is to support Member States to improve their surveillance system in line with and building on the outcomes of the JA UNITED4Surveillance. The activities that could be carried out towards scaling up national surveillance systems aim to facilitate the required national capacity building for the development of interoperable, reliable and modern national surveillance systems. The action will be driven by digital transformation, making use of relevant available health data and public health research results. This action will cover the following activities: Assessment of Member State surveillance systems: Following an initial assessment of the state of digitalisation and integration of surveillance systems in each Member State, gaps and needs for support shall be identified. The findings should support subsequent targeted investments for sustainable developments in the following areas: 28 CP-g-02.1.1 Direct grants to Member States' authorities: Union and national surveillance systems.

**Infrastructure development:** this activity aims at upgrading or developing surveillance information management systems to integrate the different components of surveillance systems for the reporting of cases and relevant information to local and national public health authorities. For example, such information system would facilitate the (re-) establishment or further strengthening of integrated surveillance systems for monitoring trends of respiratory infections in the Union, for rapidly detecting upsurges that could be related to the emergence of a new SARS-CoV-2 variant or to influenza pandemic prone strains, and enabling forecasting in order to support containment and mitigation measures and to trigger healthcare system and EU preparedness. These digital data reporting systems that guide the entire surveillance process should be customisable to adapt to different surveillance objectives and diseases under surveillance. This action could facilitate the set-up or strengthening of national early warning and response systems, linking existing other alert and information systems for the detection of new emergent threats, including integration of animal and environmental health data sources and to facilitate the reporting to the EU EWRS, including linking national systems to the future HERA IT Platform. Infrastructure development projects will also allow Member States to promote interoperability of data across different information systems, to facilitate data linkage with external databases, if deemed relevant (e.g. with immunisation information systems, mortality databases, screening programmes databases), and to integrate advanced data validation and analysis tools benefitting from new technologies, such as artificial intelligence. Such customisable surveillance systems would therefore cover a range of diseases which are part of the EU surveillance notifiable diseases, from epidemic-prone diseases to diseases that are part of prevention and control programmes (AIDS, tuberculosis and vaccine preventable diseases);

**Capacity building:** Member States will be supported in establishing training programmes targeting surveillance at the different levels of the healthcare systems. The training will cover the various surveillance methods developed or upgraded based on the results of the JA UNITED4Surveillance, this grant, and other activities at national and EU level. A training-of-trainers module will also be included to strengthen national and subnational surveillance for longer-term capacity building sustainability. The training activities will include technical and legal background knowledge on the implementation of integrated surveillance, including compliance with Regulation (EU)2016/67929; **Piloting, implementation and uptake** according to Member State priority needs: Newly established or upgraded integrated surveillance systems will be piloted at national level to test and improve functionality, as well as to demonstrate end-to-end interoperability.

#### CANCER

## Cancer screening programmes

The aim of this joint action is to support the full implementation of cancer screening for breast, colorectal and cervical cancers, in line with the Commission Initiatives on Breast and 30 Council Recommendation of 2 December 2003 on cancer screening. The action responds to the 'Call to Action' issued under the Czech Presidency of the Council as part of the Presidency conference on "Modern Cancer Control: Saving Lives through Smart Solutions". This action will cover the following activities:

feasibility testing, planning, piloting of implementation of cancer screening for prostate, lung and gastric cancers to facilitate a step-wise approach for roll-out and full implementation;

identification of and addressing barriers and facilitators for the utilisation of screening services within different health systems in the Member States;

structured and sustainable exchange of experiences and best practices between the Member States including the development of quality standards for piloting and rolling out modifications by multi-professional teams involving also peer support and addressing training needs;

supporting the further development of the European Cancer Information System and European Cancer Inequalities Registry regarding cancer screening indicators in particular to prepare for initial reporting requirements;

identification and assessment of upcoming innovative methods and practices in screening areas covered under the proposal for a Council Recommendation and scanning the developing evidence in other areas currently not covered, which may facilitate future extension of screening and/or early diagnosis to other types of cancers;

addressing specific challenges posed to persons with particular needs in terms of accessing cancer screening including people living in rural or remote geographical areas, persons with disabilities, or who suffer from stigma and discrimination.

## EU network for Cancer infrastructures

The aim of these two joint actions is the co-creation of an EU Network of (national level) Comprehensive Cancer Infrastructures, avoiding potential unnecessary duplication of activities. They will cover the following activities:

Support to the establishment or improvement of national Comprehensive Cancer Centres or Networks;

Establishment of new cancer (reference) networks of expertise focusing on cancers and cancer conditions not yet covered by established ERNs building on the preparatory work and conceptualisations developed through the JANE Joint Action and development of potential additional networks which will also ensure synergies and interoperability with the existing data infrastructure for ERNs;

Integration of the new (reference) networks of expertise and the established ERNs on rare cancers.

## HEALTH SYSTEMS & HEALTHCARE WORKFORCE

### Enhancing European reference Networks

The proposed action will support coordinating centres and members of the 24 ERNs for the coordination, management and operational activities (including integration of new members and affiliates partners). The action aims to fulfil the goals of the network including, through:

coordination, management and operational activities of ERNs;

knowledge generation and exchanges of best practice concerning diagnosis and the delivery of high-quality and cost-effective healthcare for patients with rare or low prevalence diseases;

dissemination of generated knowledge on rare or low prevalence diseases to a wider audience;

coordination of and support for development and updating of clinical practice guidelines and other clinical decision support tools;

coordination, promotion, and management of professional training activities, including through the ERN virtual academy;

coordination, promotion, management and support for virtual discussions on clinical cases through the Clinical Patient Management System IT tool, including contribution to its development;

coordination of and support for functioning of ERN registries, including joining of the European Platform on Rare Disease Registration (EU RD Platform) in line with their technical specifications;

coordination, management and support activities for long-term sustainability of the ERN system and better integration of ERNs into national systems;

support to collaboration activities to effectively link Ukrainian competent authorities and healthcare units to the ERNs, contributing to capacity building and best practice sharing with Ukraine, building on the experience of the Rare Diseases Hub Ukraine.

### 'Healthier Together' EU NCD initiative – chronic respiratory diseases (CRDs)

The aim of this joint action is to reduce the burden of CRDs and their risk factors, both at personal and population level, and to support the Member States in their efforts to meet the Sustainable Development Goals, in particular Goal 3, Target 3.466, as well as the NCDs targets of the WHO67. The activities will include the implementation of comprehensive public health policies, transferring of best practices and innovative approaches, development of guidelines, and launching of actions expected to have a significant public health impact. It will include possible areas of cooperation and synergy with the Zero Pollution Action Plan, the EU's Chemicals Strategy for Sustainability and

the Europe's Beating Cancer Plan. Activities should also include an equity dimension and aim at reducing health inequalities. The joint action will take into account results of relevant Horizon 2020 projects, as well as of relevant Horizon Europe projects and it will be complemented by the action "DP-g-23-31- 02 Call for proposals to support stakeholders on prevention of NCDs in the area of chronic respiratory diseases (CRDs)".

## Actions with a cost below 20k euros

These kind of actions include:

Crisis preparedness;  
Health promotion and disease prevention (in particular the promotion and prevention of non-communicable diseases);  
Strategic agenda for Medical Ionising Radiation Application;  
Mental Health and Cancer;  
Global Health;  
Implementation of Regulations on medical devices and in vitro devices;  
Implementation of legislation on blood, tissues, cells and organs;  
Development and enhancement of MyHealth@EU services, including vaccination card services.

## PROCUREMENT

The overall allocation reserved for procurement contracts and administrative arrangements in 2023 amounts to 176 428 071 euros. In 2023, the Commission intends to undertake actions through contracts following public procurement (call for tenders and use of existing framework contracts) or administrative arrangements (including service level agreements, co-delegations and memoranda of understanding) with other Commission services (e.g. JRC, DIGIT, ESTAT, COMM) or European bodies (e.g. European Environmental Agency) to support priorities in the following thematic areas.

The **areas of interventions** are the same at the ones for the grants section.

## Eligibility criteria

The essential eligibility criteria of grants are specified in the calls for proposals. Grant applicants and partners shall meet the following selection criteria:

stable and sufficient sources of funding to maintain their activity throughout the duration of the grant and to participate in its funding ('financial capacity');  
sufficient operational and professional capacities to implement the activities for which co-funding is requested ('operational capacity'). Organisations participating in several projects shall have the sufficient financial and operational capacity to implement multiple projects. The verification of the financial capacity shall not apply to international organisations and public bodies. Proposals will be assessed based on the following award criteria:

relevance to the priorities of the call for proposals;  
quality of the proposed action;  
impact of the proposed action. Grants shall involve co-financing. **The maximum possible rate of Union co-financing is up to 60%** of the total eligible costs of the action, unless specified otherwise in the specific calls for proposals. In cases of exceptional utility, the Union contribution may be increased up to 80% of the total eligible costs. In the case of European Reference Networks (ERNs), the Union contribution may be up to 100% of eligible costs in accordance with Article 8(4) of Regulation (EU) 2021/522.

## Total budget

Of the more than **735 million euros** available, **428.2 million** are earmarked for grants and **176.4 million for procurement**. The remaining 131 million will be spent through indirect management, which involves concluding agreements with specific entities called upon to implement certain actions

## Links

[The EU4Health Programme - work programme for 2023](https://hadea.ec.europa.eu/system/files/2022-11/wp2023_annex_en.pdf)  
([https://hadea.ec.europa.eu/system/files/2022-11/wp2023\\_annex\\_en.pdf](https://hadea.ec.europa.eu/system/files/2022-11/wp2023_annex_en.pdf))

**PUBBLICATO**  
25 Nov 2022

**AMBITO**  
Europeo

**SETTORI**  
Sanità

**STANZIAMENTO**

€ 735 790 000

**FINALITA'**

Sviluppo

**UBICAZIONE INVESTIMENTO**

Europa