



EuSANH-ISA

Improving Science Advice for Health in Europe, EuSANH

Report of first annual meeting – Executive Summary

Work package 2, Deliverable 2.3

WP Leader: NIZP-PZH,

National Institute of Public Health - National Institute of Hygiene

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Background information on EuSANH and the project EuSANH-ISA**EuSANH**

EuSANH is a network of science advisory bodies in Europe, which are active in the field of health. Currently (April 2009) national science advisory bodies from twelve European countries are participating in EuSANH. Advisory bodies from more European countries are expected to join in the near future.

Mission, goal and method

The objective of EuSANH is to promote independent scientific advice on health issues to national and European health authorities and to support evidence-based health policy. Reports published to fulfil this objective may also be of interest to health professionals and the general public.

To achieve this goal EuSANH will focus on European exchange of information (national reports), mutual consultation of national experts, coordination of work programs and the joint work on the preparation of European science advisory reports on health.

EuSANH project: Improving Science Advice for Health in Europe, EuSANH

EuSANH received European funding in the 7th framework programme of DG Research for a 3-year project (1 February 2009-1 February 2012) entitled: Improving Science Advice for Health in Europe, EuSANH, abbreviated EUSANH-ISA.

The general objective of this project is to improve the quality, effectiveness and efficiency of science advice for health across Europe

Science advice is any recommendation for policy action based on scientific knowledge, considering also expert judgment, ethical and societal values, and experience from relevant stakeholders. Many EU Member States have national science advisory bodies. However, many health issues have transnational dimensions. Moreover, the rapid increase of scientific knowledge and health issues to be addressed, exceed what can be dealt with by national bodies separately. Accordingly, international collaboration between national bodies will lead to more effective and efficient science advice, in support of decision-making at national and EU level.

The general objective has been translated into the following specific objectives and work packages

- Describe the functions and structure of existing national science advisory bodies for health in the participating European countries and carry out a thematic analysis of reports from each country
Work package 2, WP Leader NIPH-NIH; task leader SNSPMS
- Establish a common 'best practice' methodology for science advice
Work package 3, WP Leader ISCIII
- Develop a plan for communication and cooperation in the expanding network of science advisory bodies, taking advantage of the Sinapse electronic communication system.
Work package 4, WP Leader SHC
- Illustrate the common methodology and the functioning of the network by developing a pilot case study for a European science advisory report *Work package 5, WP Leader SBU*
- Disseminate the results of the project during and at the end of the project
Work package 6, WP Leader GR, task leader SNSPMS

Advantages of the project go beyond 3 year period

A common methodology with improved transnational cooperation promotes open governance, as more evidence-based policy making in Europe will be more transparent to the public. The recently established European Science Advisory Network for Health coordinates activities among science advisory bodies within the EU, and is eminently suited to provide the infrastructure for these tasks. The consortium consists of six contractual partners supported by an External Advisory Committee. As improvement of science advice is a long-term goal, this coordinating action project will also aim at strengthening the network beyond the time frame of the project.

Management structure

The project management and coordination is the key to the success of the Coordination Action project. The Coordinator has overall responsibility for project management, the coordination actions and the dissemination of information. He is also responsible for all communication with the Commission.

The consortium consists of the following six beneficiaries all scientific advisory bodies and members of EUSANH

- Health Council of the Netherlands (GR), Coordinator
- Institute of Health Carlos III, Spain (ISCIII)
- The Superior Health Council, Belgium (SHC)
- Swedish Council on Technology Assessment in Health Care, Sweden (SBU)
- National Institute of Public Health - National Institute of Hygiene, Poland (NIPH-NIH)
- National School of Public Health and Health Services Management, Romania (SNSPMS)

The Steering Committee consists of one senior representative from each of the beneficiaries in the consortium, and is chaired by the Coordinator. It is responsible for all technical, strategic and management decisions in relation to the EuSANH-ISA Coordinating Action project and for reviewing the work programme and approving any changes. It is also responsible for reviewing the project progress and the technical quality and timely delivery of all project results.

Furthermore, an External Advisory Committee is invited to comment on the work programme and progress, and advise the Steering Committee. This committee will enable EuSANH-ISA to optimise its added value in science advice for health at the European level. This committee consists of scientific advisory bodies from European countries (all EuSANH members) and international (mostly European) organisations in the field of health: Czech Republic, National Institute of Public Health; Finland, National Public Health Institute; France, Haute Autorité de Santé; Germany, Institute for Quality and Efficiency in Health Care/German Institute of Medical Documentation and Information; Portugal (Ministry of Health, advisory body in establishment); Switzerland, Swiss Federal Office of Public Health (potential member); the European Centre for Disease Prevention and Control (ECDC); the Health Evidence Network (WHO Europe, HEN); the European Food Safety Authority (EFSA); the Federation of European Academies of Medicine (FEAM); the European Observatory on Health Systems and Policies; and the European Academies' Science Advisory Council (EASAC); the European Network for Health technology Assessment (EUnetHTA); the Institute of Medicine (IOM, USA) and the London School of Hygiene and Tropical Medicine (LSHTM).

Executive summary

Final conclusions - André Knottnerus

General remarks

From our exchange and discussions it is clear that both EuSANH and EuSANH-ISA have to cover, and indeed cover, a broad area of fields including primary prevention, screening, public health, nutrition, health care, innovative technologies and technology assessment in a broad sense, and health policy interventions. In addition, the whole range of health problems, from infectious diseases to chronic illness is studied. On the one hand, this emphasizes the importance of the network, by which we can cover much more than in every separate organisation, and at the same time, it challenges us to optimally define our common ground, as to both subject matter and methodology.

In addition, it became very clear that while science advice has a general basis in research, the presented evidence must always be put in to a national or even local context of policy decision making. To promote this process, there is a strong need for a much better knowledge-policy interface, as to content, tools, and, last not but least, effective personal interaction between scientist-advisors and policymakers. Further identification of facilitators and barriers of these interactive processes - at local, national, and European levels – will be crucial for achieving our mission to deliver science advice that is not only of high quality, but also tailor-made, easily accessible, timely, and meeting the needs of the policymaker.

To achieve this at the European, national, and local levels, the European collaboration between our national science advisory bodies provides unique opportunities, in our good cooperation with our network of international advisory organisations.

Further improving the effectiveness of science advice to improve health policies

The presentations by Martin McKee and our related exchange made clear that a thorough mapping of the policy and competence context is of vital importance to both high quality and tailor-made interaction between the science and policy domain. Moreover, involvement of various 'backstage players' - such as political think tanks, industry, and patient groups – is very important, both for making optimal problem analyses and anticipating high impact in terms of acceptance and implementation in policy and public health practice. By the same token, actively looking for better insights in the policy making process is key, including the exploration, understanding, and appropriately handling biases, among which 'confirmation bias' (meaning that policy

makers are much more inclined to select information in such a way that they are confirmed in their policies rather than accepting refuting evidence showing that they are on the wrong track). We need trusted relationships between advisors and policy makers, that will strongly facilitate mutual credibility, tailor-made advisory formats, and timeliness of the – where needed - interactive advisory processes. Working in this direction, we can be confident that there is substantial room for improvement: both researchers and policymakers can do much better.

In this connection, the presentations by national staff members demonstrated that there is much to learn from ongoing advisory projects, to exchange and improve our national and European science advisory work, as to both content and methods. Also, it was shown that we share a lot of cross-border health and health care issues, which is indeed both an important justification and promise of our collaboration.

Challenges and opportunities for EuSANH and collaborators

Of course, key challenges remain to further strengthen and extend the EuSANH network and to successfully achieve the objectives of the EuSANH-ISA project. In addition, a new intriguing challenge has been identified: the expected FP7 call on knowledge transfer (Health 2010.3.3-3), anticipated for this summer, covering the topic: Developing and implementing methods for the transfer of research into policy in the fields of health promotion and disease prevention. In this very fruitful meeting, first ideas for a possible application have been exchanged, preferably as collaboration between EuSANH and the European Observatory. A concrete follow-up of this will be communicated and organised shortly after the meeting.

Finally, it has been considered that further collaboration on producing science advice on specific international health issues should be promoted. A concrete example is the collaboration between the Health Councils of Belgium and the Netherlands on risk factors for childhood leukaemia, and as a possible new topic the issue of HPV vaccination and its implications for cervical cancer screening has been enthusiastically received by a number of participant bodies. Also this topic will be followed-up for further elaboration.

Next year's meeting

Finally, the participants expressed their great appreciation for the Warsaw meeting, as to both content and atmosphere, and are grateful to the Polish team for taking care for an excellent programme and organisation, and for their great hospitality.

For the next annual meeting in Madrid a similar format is preferred, combining the discussion of EuSANH-ISA's progress with staff exchange on concrete advisory projects of our national organisations (possibly also including collaborations between countries).