

19 MAY 2010

Ladies and Gentlemen,

Commissioner Dalli has asked me to say how sorry he is that he cannot be here with you today. He very much wanted to be here. However, this was not possible due to a change of schedule in the European Parliament discussions in Strasbourg.

He has asked me to speak to you on his behalf, and to stress that he fully recognises the important work you do in giving a voice to 150 million patients in Europe - and to those closest to them.

The Commissioner shares the values of patients' rights, equity of access and the patients' perspective which underpin your work.

Commissioner Dalli has further asked me to assure you that he is committed to putting patients at the heart of EU health policy. He is determined to develop health action for patients and with patients and counts on your input and support in the coming years.

## **Patient involvement in policy making**

If we want to develop policies to the benefit of patients, we first have to listen to patients themselves. At European level, organisations such as the European Patients' Forum help us to do so.

Your participation in both the Health Policy Forum and the Working Group on Patient Safety and Quality of Care, give us a better understanding of the most important issues to patients. It also enables us to develop a public health policy based upon what really matters to them.

In return, we need to keep you informed on our actions. This was the motivation behind the Europe for patients campaign, launched by the Commission in 2008, and covering 11 EU healthcare policy initiatives ranging from the proposal for the cross border healthcare directive to the European cancer partnership and the EU mental health pact. We wanted to provide a single information source to patients and citizens organisations interested in the EU healthcare related policies. The website is available in 22 languages and I urge you to also post your information, events on this website.

Similarly, I very much welcome the successful Value + project, part-funded by the EU Health Programme and coordinated by the European Patients' Forum, with the ambition of creating a model of good practice on the involvement of patients in policy making.

## **Funding**

But we also need to recognise the realities of the health sector today. This is particularly pertinent in the light of the current economic turmoil we find ourselves in.

The health sector is coming under sustained scrutiny due to increasing budget cuts across the board. Difficult decisions will have to be made on where best to prioritise limited resources.

## **HTAs**

For instance, we have to ensure that expensive new therapies are chosen and used in the most efficient way possible.

I believe health technology assessment can hold the key to unlocking the potential for identifying the most efficient new therapies at EU level - with the help of the best experts from the Member States. Mr Rys from my Directorate-General touched on this in his presentation to you yesterday.

## **Health promotion and prevention**

Because we, at the European Commission, fully recognise the need to prioritise squeezed resources efficiently we are placing particular emphasis on health promotion and empowering people to make healthy choices, thereby preventing avoidable diseases from occurring in the first place.

A healthy population contributes to a healthy economy. In other words, if we can help people age in better health today, we can save billions in healthcare spending tomorrow.

## **Access to healthcare**

Whether in good economic times, or in bad, we must never forget that patients expect and deserve access to good quality and safe healthcare based upon the principle of solidarity. This is very much reflected in your "Patients' Manifesto". And I congratulate you on this initiative.

The proposal currently before the Council of Ministers on patients' rights in cross-border healthcare would foster the right to receive safe and good quality treatment in another EU Member State - and be reimbursed for it.

Yet very few patients are aware of this right and, as a result, very few patients exercise this right.

I hope that Member States will soon give their green light to our proposal so that clear rules can be provided on patient mobility and enabling patients to make an informed choice about the care they receive.

## **Safety**

When patients are diagnosed or treated, they should trust that the healthcare they receive is safe.

A recent Eurobarometer survey on patient safety which we published last month to coincide with Patients' Rights Day offered striking insights:

- Half of all respondents felt they may be harmed while receiving healthcare;
- A quarter of the respondents claim they, or one of their family members, have experienced an adverse event with healthcare – and incidentally, these events go largely unreported;
- A third of respondents did not know which body is responsible for patient safety in their country.

Furthermore, the number of people who were satisfied with the quality of care in their country varied greatly. 97% of Belgians were generally happy with their health system, yet the same applied to only 25% of Greeks and Romanians.

The results underline the need for further reflection on:

- how to improve the safety and quality of healthcare in the EU;
- how to ensure that patients are confident that the healthcare they receive is safe; and
- that they are adequately informed on what action they can take in case something goes wrong.

Last summer's Council of Ministers Recommendation on patient safety called for action to be taken at European level to improve patient safety through better EU-wide coordination, improved reporting of adverse events, more patient involvement and better training of staff.

## **Organs**

The Lisbon Treaty has given the European Union a mandate to legislate on the safety and quality of substances of human origin. This has paved the way towards a proposed Directive setting basic quality and safety standards for human organs and a ten point Action Plan on strengthening cooperation in the area of organ donation.

Yesterday, Commissioner Dalli took part in the European Parliament's plenary debate on this very proposal and the vote took place earlier today. The successful result means that we are now one step closer in helping the 50 000 Europeans currently waiting for an organ transplant. It will help maximise efforts to increase the availability of organs and to ensure transplants are of the highest quality and safe right across Europe.

## **Health inequalities**

I would like to finish with another issue uppermost on my list of priorities.

Inequalities in health are a scar on the conscience of the European Union.. I firmly believe it is unacceptable that, in today's world:

- The difference in life expectancy for women across Europe can be as much as 8 years, and over 13 years for men;
- Infant mortality rates vary nearly six-fold within the EU; and
- Heart diseases can kill 8 times more people in Lithuania than in Spain.

I was recently reminded of a thought-provoking quote by Martin Luther King, who said, *"Of all forms of inequality, injustice in health care is the most shocking and inhumane"*.

Although he made this statement almost half a century ago, it still applies today.

By sharing best practice and knowledge and by coordinating efforts in all 27 EU Member States, the European Union is playing its part in confining health inequalities to the pages of history.

I hope the European Patients Forum will join us on this journey.

Thank you very much.