

ATTENDANCE

SKÅNE	Mikaela Nordenfelt Jakob Kroon
LOWER AUSTRIA	Maria Ganner Judith Willert
NHS 24 SCOTLAND	Toni Dedeu
VÄSTRA GÖTALAND	Hanna Katarina Nyroos
VENETO	Massimo Mirandola Elena Val
FLANDERS	Solvejg Wallyn
NORTH OF ENGLAND EU PARTNERSHIP	David Ritchie
PODLASKIE	Michal Szczepura
VYSOCINA	David Beranek
EAST OF ENGLAND	Jackie Eveleigh
EMILIA-ROMAGNA	Antonio Addis (via video link) Tania Salandin (via video link) Aki Ishiwa
TUSCANY	Antonella Pollazzi Maria Ruggiero
EUREGHA SECRETARIAT	Ingrid Jansson
CATALONIA	<i>via proxy to Toni Dedeu</i>

1. CHAIR'S WELCOME AND INTRODUCTION

The Interim Chair, Toni Dedeu, welcomed everyone to the EUREGHA Annual General Assembly (GA) and a presentation round was held where all attendees briefly presented themselves.

2. MEMBERSHIP UPDATE

Toni Dedeu presented the two new members that have recently joined EUREGHA: Tuscany and NHS24 Scotland. East of England has also recently joined EUREGHA anew. Jackie Eveleigh from East of England explained that the Eastern Academic Health Science Network has recently joined the East of England office which has increased their health profile. The three members were ratified by all present members unanimously.

The Secretariat also presented the regions that have shown particular interest in EUREGHA. The regions are; Asturias (ES), Wallonia (BE), Central Sweden (SE) and Northern Ireland (UK).

3. ELECTION OF EXECUTIVE BOARD

Next followed the election of the new EUREGHA Executive Board (EB). Firstly, a brief presentation of the EB of 2012-2014 was held. The members have been; Catalonia (ES), Emilia-Romagna (IT), Flanders (BE), Lower Austria (AU), North of England EU Health Partnership (UK), Podlaskie (PL), Skåne (SE), Västra Götaland (SE) and Veneto (IT). The resignation of the EB was unanimously accepted by all present members.

All EUREGHA members have been asked to express interest in joining the EB for 2014 – 2016, however 10 is the maximum number of members that can be on the EB. Podlaskie has notified the Secretariat that they are resigning from the EB and NHS24 Scotland and Tuscany have both expressed interest of joining. The proposed new EB consisted of the following regions; Catalonia (ES), Emilia-Romagna (IT), Flanders (BE), Lower Austria (AU), NHS24 Scotland (UK), North of England EU Health Partnership (UK), Skåne (SE), Västra Götaland (SE), Tuscany (IT) and Veneto (IT). All present members unanimously endorsed the election of the proposed EB.

4. ELECTION OF CHAIR

The election of Chair was the next point on the agenda. Toni Dedeu was approved to act as Interim Chair by the EB in February after he left his position in Catalonia. Catalonia has announced that they will resign from the position of Chair and their resignation was endorsed unanimously by the present members.

The proposed candidate to take over as Chair was NHS24 Scotland, represented by Toni Dedeu. Toni presented his reasons for running as Chair and the question was raised if the members wanted to put forward another candidate. No alternative candidate was put forward and all present members unanimously elected NHS24 Scotland the new Chair of EUREGHA for 2014 - 2016. Toni thanked the EUREGHA members for giving him renewed confidence in acting as Chair of the association.

5. ELECTION OF VICE-CHAIRS

Flanders and Lower Austria have been the EUREGHA Vice-Chairs from 2012-2014. Before the GA, Flanders had announced that they were resigning as Vice-Chair which was endorsed unanimously by all present members.

Lower Austria had announced that they would like to continue as Vice-Chair and Region Skåne had announced that they were interested in becoming Vice-Chair. A discussion followed regarding if EUREGHA should continue having two Vice-Chairs or only one. The Secretariat highlighted that since the Chair is not Brussels based, it is of advantage to have at least one Vice-Chair that is Brussels based. It is useful when EUREGHA is contacted by regions and organisations that want to invite representatives from EUREGHA as speakers in conferences etc. The conclusion of the discussion was that EUREGHA should continue having two Vice-Chairs, with one being Brussels based. Since no alternative candidate was put forward Lower Austria and Region Skåne were unanimously elected Vice-Chairs for 2014-2016.

6. ELECTION OF TREASURER

North of England EU Health Partnership (NEEHP), represented by David Ritchie, has acted as treasurer since 2013. The question was raised if any member was interested in becoming treasurer but no new candidate was put forward. David Ritchie agreed to continue as treasurer for another period and all present members unanimously re-elected NEEHP as Treasurer of EUREGHA for 2014 -2016.

7. CLOSURE OF BUDGET 2013 AND APPROVAL OF BUDGET 2014

David Ritchie proceeded with presenting the EUREGHA budget. Firstly, the 2013 accounts were presented and copies of the balance sheet and income statements were distributed to all members. The accounting has been prepared by Jean-Michel Cattiez and Quentin Berryer of Cogitax SPRL. The profit of the 2013 accounting year amounts to €1,792 with a total underspend for 2012-2013 of €7,809. All present members unanimously approved the closure of the budget.

Secondly, David presented the proposed budget for 2014. The total predicted income amounts to €78,808 based on the underspend for 2012-2013 and the membership fee of the 15 full members (à €5,000). Additional income will also come from EUREGHA's participation in the Joint Action on Chronic Diseases (€26,905) and through the project EUREGENAS (€16,091), where EUREGHA has assumed the responsibilities previously held by West Sweden. The entire income for EUREGENAS will be dedicated to consultancy costs for Isabel Poli who is responsible for the dissemination of the project. The predicted expenses amount to €66,063. However, this does not include possible expenses such as office rent, staff costs for an assistant/trainee and costs related to a high level conference.

A discussion followed regarding several budget related issues. Region Västra Götaland has preliminary confirmed that they will be able to host the Secretariat until the end of 2014. However, they are only able to host one person and an alternative solution needs to be found in case an assistant/trainee will be hired from September. Mikaela Nordenfelt mentioned that Region Skåne might have the possibility of hosting the assistant/trainee, which would be ideal as Region Skåne and Region Västra Götaland are located in the same office building. The Secretariat will look into this. All members agreed that it is important that EUREGHA organises a high level conference during 2014 and that a part of the budget should be dedicated to this. The total requested budget for the high level conference of 2013 was €3,000. In the end the amount spent was €2,165.61 and it was argued that a similar budget should be put aside for the conference of 2014. Lastly, it was mentioned that Toni and David have been discussing the possibility of updating the membership fee structures and that Toni will continue to look into this. Toni also mentioned that as a target we should aim to have 20 full members by next year's GA.

After the discussions, all present members unanimously approved the 2014 budget and agreed on discharging the Chair, Vice-Chairs, Treasurer and the Executive Board for the activities of 2013.

8. PRESENTATION: NHS 24 SCOTLAND AND THE DIGITAL HEALTH INSTITUTE

Next followed a presentation of EUREGHA's newest member, NHS24 Scotland and of the Digital Health Institute of Scotland. The population of Scotland is 5, 2 million people and the total NHS funding is approximately €15 billion, with healthcare being directly funded by the Scottish government through taxation. In total, Scotland has 32 local health authorities.

The vision of NHS24 Scotland is for the Scottish population to live longer and healthier lives at home, provide integrated social and healthcare with the person at the centre of all decisions. Therefore, the Scottish parliament has recently passed a bill on integrated care. It is to be fully implemented by April 2015 and stipulates, amongst other things, a completely integrated budget for primary, community and social care. Toni is the Director of Research and Knowledge Exchange of the Digital Health Institute (DHI). The DHI is a partnership between NHS 24, University of Edinburgh and Glasgow School of Arts and it is an innovation centre for digital health.

9. UPDATE ON EUREGHA WORKING STREAMS

The Working Stream (WS) leaders and the Secretariat gave a brief update on recent and upcoming activities.

Mental Health

The activities of this WS are focused on those of the EUREGENAS project on mental health and suicide prevention and an update on the activities was given by Sol Wallyn (Flanders) and Massimo Mirandola (Veneto). Isabel Poli from West Sweden is in charge of the dissemination work package but as West Sweden has closed, EUREGHA has taken over the responsibility from West Sweden. Isabel is still the dissemination officer but she is hired as a consultant by EUREGHA. This decision has previously been approved by the EB and was now officially approved also by the GA.

In January, a stakeholder conference was organised in Brussels which was very successful. During the conference, practical toolkits, guidelines and outcomes focusing on suicide prevention in schools, workplaces and in the media were discussed. The project is also working on developing e-conceptual models on suicide prevention. The next meeting with the project partners will be held in Bucharest 19-20 May and the final conference will be organised in Brussels in November.

Cancer

David Ritchie proceeded with presenting the work of the cancer screening WS. The activities has previously focused on the EPAAC Joint Action which has now ended. EPAAC has been followed by a new Joint Action on cancer, "CANCON". EUREGHA is a collaborating partner in CANCON and David attended the kick-off meeting in Luxembourg in March.

Through EPAAC, the WS has a big pool of contacts to build on, both EUREGHA members and non-members, and the WS also has a very good relationship with the Commission's Joint Research Centre (JRC). David has drafted a methodology for how to continue the activities of the WS and this will be

circulated amongst the EUREGHA members. The idea is for the WS to become a “network within a network”, with representatives that have expert knowledge on cancer screening.

Cross-Border Healthcare

The Secretariat updated the members on the WS on cross- border healthcare which will not be very active during 2014 as its leader, Carina Kainz (Lower Austria), is on parental leave. However, if there is interest from the members, a follow-up event on the cross border patients’ directive will be organised during the fall. The purpose of such a seminar would be to follow up on how the directive has been used in the member regions, as well as to discuss the benefits and challenges with the directive as it will be the one year “anniversary” of the transposition of the directive in the fall. The Secretariat will follow up with the members and with John Rowan from DG SANCO, who attended last year’s experts’ meeting.

Integrated Care

Toni Dedeu is the leader of the WS on integrated care and e-Health and he started by updating everyone on integrated care. The WS is focused on EUREGHA’s commitments within the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA), and our participation in the B3 Action Group on integrated care. On 2 April, EUREGHA participated in the B3 Action Group meeting where both Toni Dedeu and Jean Bousquet (Languedoc-Roussillon) presented updates regarding organisational models and care pathways related to integrated care. Both Toni and Jean Bousquet also participated in a seminar during the International Conference on Integrated Care on 2 April in Brussels. During the seminar, progress in integrated care in Europe were discussed and EUREGHA members Catalonia, NHS24 Scotland and Languedoc Roussillon participated as speakers.

Toni also suggested that regional and local models of integrated care could be the next theme for a EUREGHA high level conference in 2014. There are several innovative integrated care models that are being implemented in EUREGHA’s member regions and it would be an excellent opportunity to highlight these. Mikaela also mentioned that the EIP-AHA partner conference will be organised on 2 December in Brussels. If we can find a venue around that date we could also benefit from representatives of the EIP-AHA in Brussels.

e-Health

Regarding the e-Health WS, Toni first discussed EUREGHA’s participation in the Commission’s e-Health Stakeholder Group. It is very important that our representative is dedicated to participating in the meetings. Since only 27 organisations are participating it is a very exclusive forum for EUREGHA to have a seat in. Since there have been difficulties in getting the representatives to participate, the EB decided during 2013 that a new main representative needed to be nominated. The Secretariat updated the GA that the Commission has approved the nomination of Ms Ann Tronde (Region Skåne) as EUREGHA’s main representative. Ms Tronde will participate in the next meeting in June. Mr Feszler (Podlaskie) will remain EUREGHA’s alternative candidate.

Next, the public consultation on the Green Paper on m-Health was discussed. The deadline to answer the consultation is 3 July and Toni mentioned that NHS24 Scotland will participate. Several members highlighted that it will be easier to get their region to respond to the consultation in case they receive

a draft response to comment on. The possibility of Scotland inviting the EUREGHA members to comment on the Scottish response was therefore mentioned. Hanna Katarina Nyroos (Region Västra Götaland) also mentioned that the Committee of the Regions' rapporteur on m-Health will be from Västra Götaland which also allows for the possibility of organising a joint EUREGHA/Västra Götaland seminar regarding m-Health.

Lastly, e-Health Forum in Athens was discussed. Several EUREGHA members will participate and the Secretariat updated everyone on the participating regions. Three key issues in the programme was also highlighted, one being a presentation by Antonio Addis on falls prevention and the other being the ERRIN/CORAL/EUREGHA participation in the twinning sessions of the EIP-AHA.

Research and innovation

Antonio Addis presented an update on the work of the research and innovation WS that is starting during the year. Emilia-Romagna has recently been appointed regional coordinator of an Italian working group - "the best health and social research for the best healthcare". The working group is a part of the Italian Ministry of Health's strategy of sharing the Italian vision regarding the EU presidency priorities. In this context, Emilia-Romagna is working on a comprehensive report on their regional best practice regarding research, but also on other national and European regional best practices. Antonio presented the idea to include best practices from EUREGHA members in the report to also highlight the network's best practices. All EUREGHA members agreed that this was a very good idea. Antonio will send a formal request to Progetto Mattone Internazionale, which is coordinating the activities within the Italian Presidency on health, to include EUREGHA regions in the report and will update the Secretariat on what to do next.

Antonio has also shared a document with the Secretariat on the Horizon 2020 calls where Emilia-Romagna is participating. The Secretariat will update the document to include the projects where EUREGHA is participating, and disseminate it to the full members.

Social sustainability and health equity

Hanna Katarina Nyroos presented the progress of the WS on social sustainability and health equity. Region Västra Götaland is currently drafting a programme for the WS and will invite everyone to attend a kick-off meeting which will most likely be organised during the fall. Region Västra Götaland will also organise a side event during the Open Days with the title "Health equity and LGBTQ" focusing on the lesbian, gay, bisexual and transgender community. Other seminars and conferences relating to health inequalities will be an Open Days seminar in which Vysocina participates entitled "Health inequality as a demographic challenge: applied research to generate smart growth". The 7th European Public Health Conference will be organised in Glasgow in November, also focusing on health inequalities.

10. ACTIVITIES UPDATE

Brussels Based Members' Meetings

During 2014, the Brussels based EUREGHA members have met once per month to brief each other on the work of the network and of the respective member regions. The meetings have proved very informative and it is a very good forum for gathering the Brussels based representatives of EUREGHA. The next meeting will be held on 20 May.

Lunch Briefings

The next EUREGHA lunch briefing will hopefully be a briefing on the health priorities of the Italian Presidency. The Italian Ministry of Health has not yet decided on a programme for the presidency but EUREGHA's Italian members will inform us as soon as this is done. All members agreed that it would be a good opportunity to co-organise such a lunch briefing with the Mattone Internazionale Project, as we did in December regarding the Greek Presidency.

Horizon 2020 Proposals

The Secretariat and Toni gave an update on the three Horizon 2020 proposals that EUREGHA is participating in, that were all submitted on 15 April. EUREGHA's involvement in the proposals have been discussed by the EB and with Antonio as the head of the Research WS. In all three proposals EUREGHA's involvement is focused on dissemination activities. Another key issue has been to assure that the funding EUREGHA would receive if the proposals are accepted can be used for staff costs, such as hiring an assistant/intern. More information about the three proposals can be found below:

- **RegHealth-RIN**
The partners are Innovatec (ES), EUREGHA (BE) and University of Trieste (IT). The aim is to develop a multidisciplinary network formed by academic and R&D organisations, national and regional authorities etc. to deal with the main problems affecting health research and innovation of EU regions.
- **Health2Innovation**
The partners are Inno tsd (FR), Asturias (ES), Norrbotten (SE) and EUREGHA (BE). The aim is to bridge the gap between "innovation leaders" and "modest innovators" in European regions regarding health, demographic change and wellbeing
- **4PHact**
Partners include the regions of Mid Norway and Mid Sweden, as well as several other partners from Germany, Greece and USA. The aim is to provide an innovative set of analytical foresight and impact prediction instruments, methods and widely applicable tools to quantitatively predict outcomes of policy-based public health interventions.

Open Days

Open Days will be organised on 6-9 October and EUREGHA members Vysocina, Tuscany and NEEHP are participating in two different regional consortiums that both have a health focus. Vysocina will participate in a seminar focusing on health inequalities, Tuscany and NEEHP on the other hand is participating in a seminar on health and smart specialisation strategies. As mentioned above, Region Västra Götaland will also organise a side event on health inequalities but with a focus on the LGBT

community. More information on these seminars and other health related seminars during Open Days will follow when the official programme is announced.

Joint SALAR/Eurohealthnet/EUREGHA/Italian Presidency event

On 5 November, EUREGHA will co-organise a conference on health inequalities with Eurohealthnet, Swedish Association of Local Authorities and Regions (SALAR) and the Italian Presidency. The conference will be the second day of a three day health conference organised by the Italian Presidency and coordinated by the Mattone Internazionale Project. All EUREGHA members will be invited to the three day conference and Elena Val (Veneto Region) will circulate a draft programme shortly.

Mikaela was approached by SALAR and Eurohealthnet to see if EUREGHA would be interested in co-organising the conference. At the same time, the Italian Presidency wanted to include health inequalities in the programme of their health conference and Elena therefore approached Eurohealthnet and EUREGHA in order to avoid duplications. The Secretariat has participated in the organisational meetings together with Mikaela, Elena, SALAR and Eurohealthnet. Region Västra Götaland has also been in copy in the emails as they are the leaders of the WS on health inequalities.

All attending members approved of the idea. Regarding the theme of the conference, Sol highlighted that it is important to focus on what regions have learnt from European initiatives on health inequalities. David also mentioned the importance of focusing on systematic inequalities and to try to avoid focusing too much on how regions can use the Structural Funds as this has already been done.

Joint Actions

The Secretariat gave a brief update on EUREGHA's current involvement in the Joint Actions. Regarding Reducing Alcohol Related Harm (RARHA) there were no further updates. Regarding Chronic Diseases (CHRODIS) a stakeholder mapping is currently being conducted. The interest in submitting relevant stakeholders to the CHRODIS contact database has foremost been extended to the members that are participating with EUREGHA in CHRODIS (Region Skåne, Catalonia, Languedoc Roussillon and NEEHP). However, if any other member has key experts working on chronic diseases in the region they are welcome to submit them to the Secretariat.

High Level Conference

All present members agreed that EUREGHA should organise a high level conference during 2014. As mentioned above, Toni proposed the theme to be regional and local examples of integrated care. The discussions that followed were positive to the theme, with the condition that a policy focus is included. An added value with focusing on integrated care would also be that it could be framed as "scaling up" the work of the EIP-AHA which is a priority for the EIP during 2014. Logistically, an organisation committee needs to be put in place by June to start planning the conference. If any member has a suggestion of an alternative theme they are kindly asked to contact the Secretariat as soon as possible. If no alternative theme is suggested, the theme of integrated care will be considered approved.

Other activities

Several members raised the question of internal dissemination and that EUREGHA should write a dissemination strategy to complete the communication strategy, which focused more on external

communication. This was mentioned as an important issue that the Brussels based members' meetings can deal with.

Antonella Pollazzi (Tuscany Region) announced that they will be organising a conference during the fall on evaluation of healthcare performance and invited the EUREGHA members to attend the conference. Antonella will send more information regarding the conference for dissemination to the Secretariat as soon as a draft programme is prepared.

To conclude, Toni thanked the Secretariat and all the members for attending the GA and commended them for the ambitious and great work they do.

END OF MEETING