

# BUILDING CAPACITY AND IDENTIFYING APPROPRIATE SUPPORT: **HOW CAN THE EU CONTRIBUTE TO SECURING RESOURCES FOR HEALTH SYSTEMS?**

By: Nicole Mauer, Beatrice Durvy, Rebecca Forman, Christina Amrhein, Ilana Ventura, Stefan Eichwalder, Mircha Poldrugovac, Dušan Jošar, Vesna Kerstin Petrič, Mojca Presečnik, Ann Marie Borg and Dimitra Panteli

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**Nicole Mauer** is Technical Officer, **Dimitra Panteli** is Programme Manager, European Observatory on Health Systems and Policies, Brussels, Belgium; **Beatrice Durvy** is Research Fellow, European Observatory on Health Systems and Policies and Technical University of Berlin, Germany; **Rebecca Forman** is Technical Officer, European Observatory on Health Systems and Policies, London, UK; **Christina Amrhein** is Project Officer, **Ilana Ventura** is Deputy Head of the Department on DRG, Health and Pharma Economics; **Stefan Eichwalder** is Director of the Health Systems Division, Austrian Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Vienna, Austria; **Mircha Poldrugovac** is public health expert, Expertise France, Slovenia; **Dušan Jošar** is secretary, **Vesna Kerstin Petrič** is head of the Office for Cooperation with WHO; **Mojca Presečnik** is head of the European Cohesion Funds unit, Ministry of Health, Slovenia; **Ann Marie Borg** is public health expert, Expertise France, Belgium. Email: [mauern@obs.who.int](mailto:mauern@obs.who.int)

**Summary:** European health systems face increasing challenges and demands, while striving to provide high-quality care. The European Union (EU) offers support to complement national efforts, but accessing and utilising it can be challenging for Member States. Austria, Belgium, and Slovenia are collaborating on a multi-country project supported by the EU's Technical Support Instrument, to create an EU Health Resources Hub. This advisory service aims to help Member States access EU funding instruments for their health needs. This article discusses the project's goals and early learnings, offering insights that could inform future health funding opportunities and policies in Europe.

**Keywords:** *Investment, Health System Strengthening, Capacity Building, Technical Support Instrument, EU Funding*

## Introduction

European health systems may be different, but they share common values, challenges, and priorities for transforming their health systems including strengthening the health workforce, greening the health sector, advancing digitalisation, and better integrating healthcare. In this context, adequate funding is key to ensure sustainable, innovative, and resilient health systems. While health systems are primarily a competence of the Member States, the European Union

(EU) can provide support for strengthening health systems and complement national activities in the area of health policy. Specifically, funding beyond what is available at country level, including EU instruments, can facilitate much needed reforms and investments in health and health systems. However, as previous European Observatory on Health Systems and Policies (Observatory) publications highlight, when it comes to health, most EU funding instruments are presently fragmented and challenging for policymakers to access and navigate

given that they often come with different objectives, rules, and designs, and need to be blended with other national or European instruments.<sup>14</sup> To address these issues, in 2021, the Council of the EU under the Slovenian presidency called for the creation of a “One Stop Shop” to provide tailored technical support and ease access to EU instruments for health.<sup>15</sup>

With the support of the European Commission’s Directorate General for Structural Reform Support (DG REFORM), Austria, Belgium, and Slovenia have now joined forces in an unprecedented multi-country project to answer this call and support the creation of a Health Resources Hub whose mandate will be to assist Member States in accessing EU resources to meet their health systems’ needs. The project, under DG REFORM’s Technical Support Instrument (TSI) (see Box 1) and implemented by Expertise France with the collaboration of the Observatory, is scheduled to run from September 2022 to September 2024 and pursues two main goals: 1) to build capacity to better advocate for and secure public investment for health systems and 2) to strengthen Member States’ capacity to reach EU funding for health while piloting the concept of an EU-wide advisory service.

This article will focus on the work achieved thus far under the latter goal and explore the potential of available EU tools, as well as contemplate their limitations and reflect on possible lessons learnt to inform future health priorities at EU level.

### State of play: What has the project achieved to date?

The TSI project on the EU Health Resources Hub was officially inaugurated with three national kick-off meetings hosted by the participating Member States at the beginning of 2023, which served as an opportunity for project stakeholders, including Member State representatives, DG REFORM, Expertise France and the Observatory, to meet and discuss the deliverables and way forward. While the project pursues common goals, it also adapts to national priorities and needs of the participating Member States.

### Box 1: What is the Technical Support Instrument?

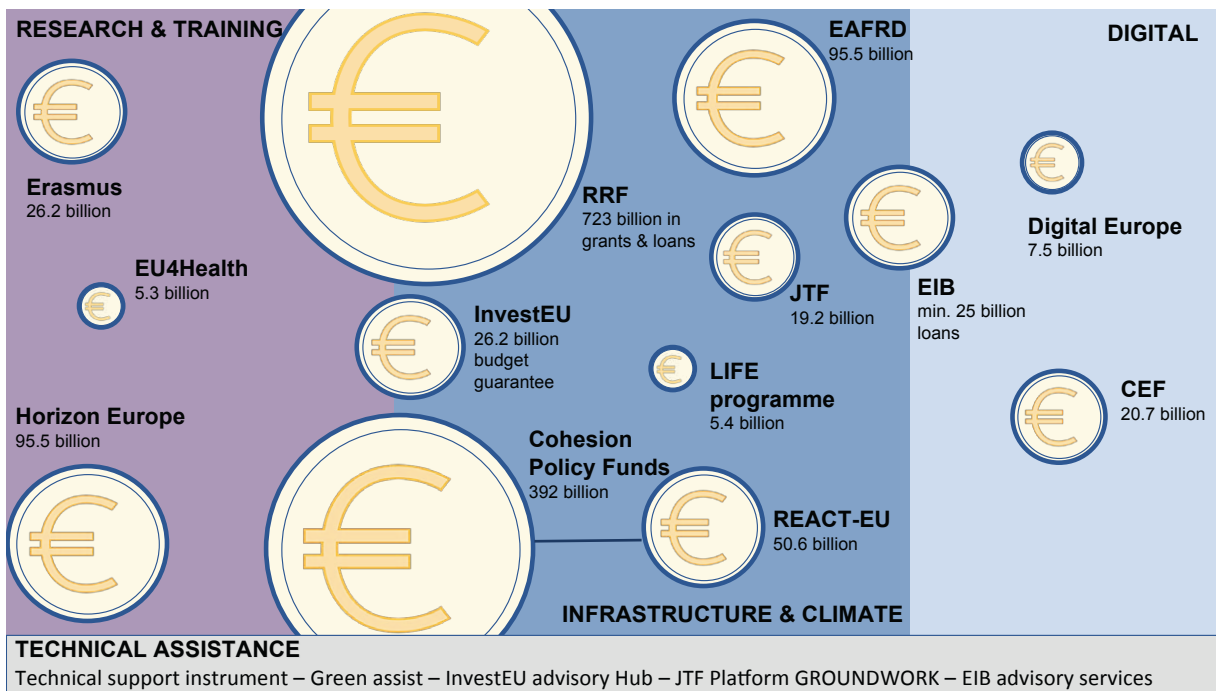
Through the Technical Support Instrument (TSI), DG REFORM<sup>16</sup> helps EU countries design and implement reforms that support job creation and sustainable growth. The technical support offered is tailor-made and can take the form of, for example, strategic and legal advice, studies, training, and expert visits.<sup>17</sup> The application process runs on a yearly basis and is very simple, requiring submission of a short request on behalf of interested Member States. Key assessment criteria (as defined by the TSI regulation) include the urgency and scope of the challenges listed in a request and how the support requested matches the priorities, as well as the institutional and administrative capacities of the Member State involved. The added value of the TSI consists in accompanying, on the ground, the authorities undertaking reforms throughout the reform lifecycle: from working closely with them in designing the reform, through its preparation and all the way to implementation. In doing so, it offers tailor-made support to the Member States and promotes the implementation of reforms with measurable impacts at national level. There is no requirement of co-financing.

Health has become a more prominent Commission priority following the COVID-19 pandemic and thus DG REFORM will continue to focus support to Member States carrying out reforms of their health systems.<sup>18</sup> DG REFORM currently supports over 40 health reforms in 21 Member States.

The Observatory conducted a mapping exercise to identify relevant EU instruments that match the reform priorities that Austria, Belgium and Slovenia chose for this project and developed a hands-on manual for each country.<sup>19</sup> The three Member States have chosen pilot projects (see next section) where the realisation is crucial for current reform efforts on the one hand, and which will serve as an exercise to gauge how the EU can best support its Member States when they seek funding opportunities for health on the other. These pilots will inform the process of conceptualising the “One Stop Shop” for EU funding for health, a “EU Health Resources Hub”, to supply these services. In the process of building this EU Health Resources Hub, tailor-made approaches are developed through technical assistance and capacity building, targeting: 1) Project Inception and Scoping, by supporting Member States in developing concepts based on first ideas on the health policies to be implemented; and 2) Project Development and Financing, by supporting the selection of the EU funds to apply for, and by advising on strategic blending of different funding mechanisms.

### Member State pilot projects: Reaching EU funding for greener, more integrated, and needs-driven healthcare

**The Austrian pilot** “Greening Health Care Facilities” focuses on reducing the environmental impact of the healthcare sector, particularly in the area of hospital infrastructure. With a share of 7% of the national CO2 footprint, the Austrian healthcare sector generates significant emissions and is thus an important target for achieving the federal government’s goal of climate neutrality by 2040 and fulfilling international commitments to reduce greenhouse gas emissions. Substantial investments are needed to increase the environmental sustainability of healthcare facilities. Therefore, the objective of the project is to identify suitable funding opportunities on the EU level for climate projects (such as implementing energy efficiency measures) in selected hospitals. The pilot project further foresees the formulation of recommendations for the potential combination of different funding mechanisms as well as support for hospitals during the application process. Participating hospitals can apply in two phases – in autumn 2023 for already well-defined projects and in spring 2024, benefitting from the knowledge obtained in the first phase of the pilot.

**Figure 1:** Comparative overview of relevant EU funding mechanisms by budgetary size and type of support provided

Note: This figure does not seek to provide a comprehensive mapping of all available EU funding and only includes those instruments which have been identified as being relevant for the three chosen pilot cases. Funds are allocated according to the area of intervention they are more likely to support within the three given pilots. They may however also be relevant for other interventions (e.g., EU4Health could be relevant for Digital, given that it provides funding for the development of the European Health Data Space).

Source: Authors' own <sup>10</sup>

**The Belgian pilot**, “Building a digital dashboard to support the implementation of Population Health Management (PHM) at locoregional level”, has been drawn up in the context of an inter-federal plan on integrated care to be implemented from 2024 onwards.<sup>10</sup> PHM is crucial for improving integrated care and a data-driven population needs-based approach has the potential to strengthen prevention, provide tailored care and thereby improve health outcomes. This innovative approach requires both investments to build capacity in different areas as well as developing the necessary data and IT infrastructure to support its implementation. The European Health Data Space will serve as an essential framework in this regard.<sup>11</sup> The pilot is thus composed of two stages. The first is centred around capacity-building and bringing together key actors and expertise to facilitate learning from existing examples of databases and dashboard development, including their application for PHM. This preparatory stage is conducive to the success of the subsequent dashboard design and implementation. The second stage focuses

on creating the digital infrastructure to integrate health, social and other data sets from different sources into a single dashboard.

Primary healthcare has a central role in the Slovenian healthcare system. The increase in demand for primary care services has exacerbated since the pandemic and is compounded by a lack of healthcare professionals, in particular family medicine specialists. Given the current situation, **the Slovenian pilot** on “improving access to primary care” aims to achieve this by broadening the scope of the existing national call centre to include telephone triage and advice. A more general standardisation of triage guidelines is also needed, in particular related to non-urgent conditions relevant to primary care. Hence, the project also foresees the establishment of a training programme for a large number of primary care nurses. Furthermore, the pilot project will explore the possibility of establishing a centre for coordination and development of primary healthcare. The main purpose of such a centre would be to streamline

the implementation of organisational, technological, and professional innovations in primary care with a nationally coordinated approach. All the elements of the pilot are set to fit the digitalisation and primary care strengthening agendas supported by the Ministry of Health.

### Mapping the range of EU instruments

Overall, there is a wide range of EU instruments with the potential to support the chosen pilot cases, which have different thematic priorities, but all broadly seek to leverage investments for different types of infrastructure, digital solutions, and training opportunities. Notably, the mapping identified several instruments of different (budgetary) size and potential to support projects in the areas of Research & Training, Infrastructure & Climate, and Digital (see Figure 1). These instruments are all subject to different types of management, timing, application, and eligibility criteria. The EU instrument landscape is composed of a mix of funds that are programme-based, like EU4Health, Digital Europe or Erasmus+;

operational programme-based, like the Cohesion Policy Funds; or demand-driven investment instruments, like InvestEU or the support provided by the European Investment Bank (EIB). Some of them primarily fund multi-country projects like Horizon Europe and EU4Health, while others are focused at promoting country-level initiatives, like the Recovery and Resilience Facility and the Cohesion Policy Funds.

“blending various European and national funds is usually required”

Generally, a single EU funding programme will not have the remit (or the capacity) to fund complex health system projects in their entirety, hence blending various European and national funds is usually required. Thus, when planning a project, it is crucial for Member States to have an understanding of different EU funding instruments' scopes and deadlines and how they can be aligned. The TSI project on the EU Health Resources Hub also explores avenues for policymakers to make the case for and leverage health investment at national level (see Box 2).

### Challenges and next steps: Building capacity and reaching EU funds

Early findings highlight that navigating EU funds can be complex, even with a well-defined project. Further, the instruments currently available are not always easily aligned with Member State needs in the area of health, demonstrating that adapted support to better access relevant funds to back health system transformations is warranted. It also highlights the need to ensure a good alignment with instruments' scope and other characteristics such as timelines and application requirements. Tailored guidance documents for EU instruments applicable in certain specific areas (such as environmental sustainability) are progressively being developed by the Commission services.<sup>13</sup>

### Box 2: Making the case for public investment in health

The first strand of work in the TSI project aims to strengthen the capacity of Member States to make the case for public investment in health at the national and EU level and demonstrate clear evidence of the socioeconomic benefits of already undertaken or planned strategic public investments in health. The Observatory conducted an exercise to identify relevant analytical approaches and tools to promote greater alignment between health and financial objectives, and thus better make the case for public investment in health. These tools typically fall under five cross-cutting arguments that address common public financial management concerns and objectives:

1. Health systems investments address health needs and improve health; and without adequate funding, there will be consequences to population health outcomes and wellbeing.
2. Health system investments further societal goals and have co-benefits beyond the health sector (e.g., education, employment, economic, equity, and social cohesion benefits).
3. Health system financing can (or will be) sustainable following additional investment.
4. The health system has the capacity to use additional resources effectively and efficiently.
5. The public (particularly voters), non-governmental organisations (NGOs), and civil society groups care about health and health system-related issues, and think more funding is needed.

Data and evidence can guide and steer decision-makers towards informed investment choices, but political will, engagement, cooperation, communication, transparency, accountability, and trust are essential in driving the budget case for health forward successfully. For more information, please refer to the full report.<sup>12</sup>

### Box 3: Designing EU advisory services to support implementation

Over the years, the EU has established different types of advisory services for its Member States. The aim of this TSI project is to fill this gap, given that no identified advisory services are specifically dedicated to health and that they do not necessarily align/match the needs, priorities, and timing of projects with the application scopes and objectives of specific EU calls/funding instruments. This is in line with the Council Conclusions (2021/C 512 I/02) which invited the Commission to “strengthen the coordination across the EU programmes and policies to support more effectively the implementation of national health systems reforms with all available EU mechanisms” and “explore the provision of an advisory service” to that effect.

Yet, among the available advisory services, none are specifically dedicated to health systems and most target large loans or infrastructural projects (e.g., the InvestEU Advisory Hub). These findings confirm a gap in the current EU advisory service landscape and highlight the need for an EU Health Resource Hub dedicated to health reforms, which would aim to avoid duplications and ensure synergies

while considering existing structures and services offering technical and financial support to Member States in strengthening their health systems (see Box 3).

The results of the mapping exercise for relevant EU support instruments are informing the pilot phases in Austria, Belgium, and Slovenia. Where suitable funding opportunities can be identified



within the given time frames in the TSI project, the emerging Health Resource Hub (carried within the project by Expertise France) will support the Member States with developing their applications for funding. Despite the diverse EU funds that theoretically match the selected thematic priorities identified in the mapping, only a limited range of instruments could be potentially relevant to the participating Member States' specific pilot projects. The probability of accessing available funding is further dependent upon the current framework conditions under which these instruments operate, including tight application windows and lengthy processes, which can intensify the administrative burden already placed on the competent national authorities as well as the expected budget of the project. While the activities performed under this TSI project do not guarantee Member States access to EU funding, they aim to build crucial hands-on experience which will contribute to capacity building, as well as guide the design and delivery of a sustainable advisory hub for health systems' transformations in Europe beyond the project's end.

### Outlook on future health priorities

While this TSI project focuses on the three participating Member States, it aspires to pave the way for others who face similar, shared challenges to access the EU funding opportunities they need. Raising sufficient funding for health systems will depend on making a convincing case at the national level but also at the EU level to secure complementary funding to address these challenges. A good knowledge of the funding landscape, including specific timelines and opportunities, is at present essential to navigate this process successfully and pool available resources to maximise health outcomes. In the future, support can be provided by an EU Health Resource Hub that is based on the experiences gathered in the project.

While the range of EU instruments is broad and their potential to address different health system priorities seems high in theory, the work conducted as part of this TSI project has also uncovered some important gaps. To date, the scope, as well as the eligibility criteria, timing and rules underpinning some of these

instruments have been difficult to reconcile with the capacities, objectives, specificities, and timelines of Member States – for their chosen pilot projects in particular. Beyond the scope of this TSI project, these findings raise potential questions for the mandate of future EU Commissions concerning the suitability of the current EU funding landscape to fund health projects in Member States, to address those major challenges like prevention, digitalisation, and health workforce training, and to improve access to available instruments in the future. A summary of implications for future health priorities are highlighted in **Box 4**.

As the European elections draw closer and the new Commission takes charge of defining funding priorities for the next Multiannual Financial Framework, these findings shine a light on the progress made with leveraging EU support for health systems. At the same time, the challenges encountered reinforce the call for an EU Health Resources Hub that would enable Member States to use existing instruments more easily, while the framework conditions governing existing instruments may merit closer examination against Member States' specific needs to ensure access to the required support can be bolstered and health can play a central role in Europe's future policy and funding frameworks.

### References

- <sup>1</sup> Fahy N, Mauer N, Panteli D. *European support for improving health and care systems*. Policy Brief 43. Copenhagen: World Health Organization, 2021 (acting as the host organization for, and secretariat of, the European Observatory on Health Systems and Policies).
- <sup>2</sup> Mauer N, Panteli D, Fahy N, De La Mata I. European Union support for health systems in the pandemic and beyond. *Eurohealth* 2022;28(1):46–50.
- <sup>3</sup> Mauer N, Panteli D, Fahy N, Kahr-Gottlieb D, De La Mata I. Towards a European Health Union: New instruments for stronger and more resilient health systems. *Eurohealth* 2022;28(1):57–61.
- <sup>4</sup> Mauer N, Panteli D, Eichwalder S. Investment in Health: Supporting countries with implementing health system reforms. *Eurohealth* 2022;28(3):35–9.
- <sup>5</sup> Council of the European Union. Conclusions on strengthening the European Health Union, 2021. <https://data.consilium.europa.eu/doc/document/ST-14029-2021-INIT/en/pdf>

### Box 4: Summary of implications for future health priorities

- The ongoing TSI project on the development of an EU Health Resources Hub is collecting valuable experiences towards creating a one-stop-shop that helps Member States access EU support instruments to strengthen their health systems
- In addition, future EU Commissions could consider whether current EU support instruments are sufficiently tailored to address health system needs.

<sup>6</sup> European Commission. Directorate-General for Structural Reform Support: Helping EU Member States carry out growth-enhancing reforms, 2020. <https://commission.europa.eu/system/files/2020-09/ht0320308enn.pdf>

<sup>7</sup> European Commission. Technical Support Instrument (TSI). [https://commission.europa.eu/funding-tenders/find-funding/eu-funding-programmes/technical-support-instrument/technical-support-instrument-tsi\\_en](https://commission.europa.eu/funding-tenders/find-funding/eu-funding-programmes/technical-support-instrument/technical-support-instrument-tsi_en)

<sup>8</sup> European Commission. Reform Support: Health and long-term care. [https://reform-support.ec.europa.eu/what-we-do/health-and-long-term-care\\_en](https://reform-support.ec.europa.eu/what-we-do/health-and-long-term-care_en)

<sup>9</sup> Mauer N, Durvy B, Panteli D. *EU resources for investing in and strengthening health systems*. Tailored options for Austria, Belgium and Slovenia. European Observatory on Health Systems and Policies, forthcoming.

<sup>10</sup> INAMI. *Plan interfédéral Soins intégrés* [Interfederal Integrated Care Plan], 2022. <https://www.inami.fgov.be/fr/professionnels/info-pour-tous/plan-interfederal-soins-integres>

<sup>11</sup> European Commission. Proposal for a regulation – The European Health Data Space, 2022. [https://health.ec.europa.eu/publications/proposal-regulation-european-health-data-space\\_en](https://health.ec.europa.eu/publications/proposal-regulation-european-health-data-space_en)

<sup>12</sup> Forman R, Feil C, Cylus J. *A Mapping Exercise: Making the Case for Public Investment in Health*. European Observatory on Health Systems and Policies, forthcoming.

<sup>13</sup> European Commission. New European green funding guide to support zero pollution, 2022. [https://environment.ec.europa.eu/news/new-guide-eu-funding-programmes-environment-2022-08-17\\_en](https://environment.ec.europa.eu/news/new-guide-eu-funding-programmes-environment-2022-08-17_en)