

Overview of the work of the Welfare Committee of the Baltic Assembly in 2012

Under the Lithuanian presidency in the Baltic Assembly, the BA Welfare Committee focused on the following priority areas:

- quality of life;
- follow-up of the activities by the Baltic Council of Ministers' Task Force for Health in four areas: common system for state-funded procurement of medicines and medicinal equipment; joint specialized medical centers for more efficient use of professional skills; efficiently functioning human organ transplant system of the Baltic States; and coordination of emergency help in border towns of the Baltic States.

Agenda Item I: Baltic health care projects

BA Welfare Committee has followed the work of the Baltic Council of Ministers' Task Force for Health. As regards the results in the area of **common system for state-funded procurement of medicines and medicinal equipment**, the Partnership Agreement between the Baltic countries on common procurements of the medicinal products and medical devices was signed on 2 May 2012. Through the joint procurement and increased purchasing volume there might be created greater competition among potential suppliers and ultimately it will help to make a purchase at a lower price for all Baltic countries. Similarly, the contract will provide continued access of centrally procured medicinal products and medical devices. The Partnership Agreement has been signed for an indefinite period and other member States of the European Union and European Economic Area may join it.

Under the issue about the **possible establishment of joint specialized medical centres for more efficient use of professional skills in the Baltic States** the Directive of the European Parliament and of the Council on the Application of Patients' Rights on Cross-border Healthcare (2011/24/EU) was thoroughly discussed, specifically looking at the issue of prior authorization (Article 8), professional liability insurance, national contact points for cross-border health-care (Article 6) etc. Countries had agreed to continue the exchange of expertise and mutual cooperation on the level of specialists in various fields of interest, including cardio-surgery, rehabilitation, transplantology.

Regarding the issue of **efficiently functioning human organ transplant system of the Baltic States** the responsible expert group, which includes participation by experts, officials from the ministry level and financing experts, continues to meet once a year in a different Baltic country and exchange with information. Estonia prepares first draft agreement between Estonia, Latvia and Lithuania on organ exchange, transplantation information and statistics. This agreement will not be legally binding.

The **coordination of emergency help in border towns of the Baltic States** has not resulted in signing bilateral agreement on mutual aid for providing ambulance services in border areas between Latvia and Lithuania. The main implementation problem is the different subordination of emergency medical service offices in Lithuania and Latvia. In Lithuania these offices are controlled by municipalities,

while in Latvia state emergency medical service is controlled by the state. Agreement between the Lithuanian and Latvian Ministries of Health would have no legal effect to the Lithuanian municipalities. Therefore in June 2012 the Ministry of Health of the Republic of Lithuania informed the Ministry of Health of the Republic of Latvia that due to these reasons an overall agreement cannot be signed. Latvian officials have proposed to sign the Memorandum of Understanding and thus provide encouragement for further negotiations between the competent Latvian and Lithuanian authorities. Latvia and Estonia signed the bilateral agreement on 24 September 2010.

Agenda Item II: programmes and policies for the elderly

For the first time the Committee started to focus on the topic of **the policies and programmes for the elderly**. The idea came from the experiences shared by the Nordic colleagues. Challenges to health system are the growing demand to health surveillance services, adoption of health institutions that correspond to the needs of older population, and tackling the decreasing number of people capable to work, earn money and support economics. Cooperation among the Baltic States can be useful in the areas to strengthen inter-institutional cooperation (information exchange about the situation, legal acts, publications, research results and on-going projects), carrying out study visits for specialists among the Baltic States, taking part in conferences, carrying out surveys about common older age people health status and behavior, as well as by introducing “KeyHole” healthy food (low saturated fat and trans-fat, low sugar, salt and high dietary fiber) labeling system.

The Committee acknowledged the idea to follow the approach and initiatives taken by the Nordic countries, which have joined their resources to develop different measures tackling problems and challenges for the elderly and ill people. Nordic countries have started to introduce new technologies, e.g. the use of different sensors, smart phones, medical automats with medicaments, GPS systems that track persons in case they are lost, alarm buttons, special robots, medical banks. Welfare technology will not only benefit those in need of the care, health professionals and society at large, but also the business area, providing opportunities to reach new markets. This year the Committee has started to examine the situation in the Baltic States and the issue about the elderly will be carefully studied next year.

Agenda item III: Overviews on statistical indicators measuring quality of life

In 2011 the Committee adopted the decision on the promotion of ideas of the so-called happiness economies and felicity policy in the Baltic States. The necessary prerequisite for implementing these ideas is the measurement of the level of public happiness. This complies with the provisions of the Communication COM/2009/0433 from the Commission to the Council and the European Parliament GDP and beyond: measuring progress in a changing world. The Communication proposes to extend the list of official statistical indicators by additionally reporting on the quality of life and the collection, processing and publication of quality of life data.

The requested questions by the Committee and the received answers from the Lithuanian Department of Statistics, the Central Statistical Department of Latvia and the Statistics Estonia is depicted in the Overview; see *Attachment 1: Answers from the Lithuanian Department of Statistics, Central Statistical Bureau of Latvia and*

Statistics Estonia to the questions submitted by the Welfare Committee of the Baltic Assembly.

In 2013 the BA Welfare Committee will continue to follow the undertaken joint health-care projects. The Committee will also focus on the joint actions to implement the Directive of the European Parliament and of the Council on the Application of Patients' Rights on Cross-border Healthcare (2011/24/EU) as well as the joint projects about health resort treatment in the Baltic States.