

PARLAMENT EWROPEW

2004



2009

Dokument ta' Sessjoni

FINALI
A6-0030/2006

9.2.2006

***|

RAPPORT

dwar il-proposta għal deciżjoni tal-Parlament Ewropew u tal-Kunsill li tistabbilixxi Programm ta' azzjoni Komunitarja fil-qasam tas-saħħha u tal-ħarsien tal-konsumaturi (2007-2013) - Aspetti tas-saħħha (COM(2005) 0115 – C6-0097/2005 – 2005/0042A(COD))

Kumitat ghall-Ambjent, is-Saħħha Pubblika u s-Sikurezza ta' l-Ikel

Rapporteur: Antonios Trakatellis

Tifsira tas-simboli użati

- * Proċedura ta' konsultazzjoni
maġġoranza tal-voti mitfugħa
- **I Proċedura ta' koperazzjoni (l-ewwel qari)
maġġoranza tal-voti mitfugħha
- **II Proċedura ta' koperazzjoni (it-tieni qari)
maġġoranza tal-voti mitfugħha, sabiex tiġi approvata l-pożizzjoni komuni
maġġoranza tal-Membri kollha tal-Parlament, sabiex tiġi miċħuda jew emendata l-pożizzjoni komuni
- *** Proċedura ta' kunsens
maġġoranza tal-Membri kollha tal-Parlament, parti fil-kaži msemmija fl-Artikoli 105, 107, 161 u 300 tat-Trattat KE u fl-Artikolu 7 tat-Trattat UE
- ***I Proċedura ta' kodeċiżjoni (l-ewwel qari)
maġġoranza tal-voti mitfugħha
- ***II Proċedura ta' kodeċiżjoni (it-tieni qari)
maġġoranza tal-voti mitfugħha, sabiex tiġi approvata l-pożizzjoni komuni
maġġoranza tal-Membri kollha tal-Parlament, sabiex tiġi miċħuda jew emendata l-pożizzjoni komuni
- ***III Proċedura ta' kodeċiżjoni (it-tielet qari)
maġġoranza tal-voti mitfugħha, sabiex jiġi approvat it-test konġunt

(It-tip ta' proċedura jiddependi mill-baži legali proposta mill-Kummissjoni.)

Emendi għal test leġiżlattiv

Fl-emendi li jsiru mill-Parlament, it-test emendat huwa indikat b' tipa ***qawwija korsiva***. Test *korsiv normali* huwa indikazzjoni għas-servizzi teknici li turi partijiet tat-test leġiżlattiv li għalihom qed tkun proposta korrezzjoni bl-iskop li tgħin fil-preparazzjoni tat-test finali (pereżempju, żbalji ovvji jew nuqqasijiet f'verżjoni lingwistika minnhom). Il-korrezzjonijiet proposti huma suġġetti ghall-qbil tas-servizzi teknici involuti.

WERREJ

Paġna

ABBOZZ TA' RIŽOLUZZJONI LEĞIŽLATTIVA TAL-PARLAMENT EWROPEW	4
NOTA SPJEGATTIVA	65
OPINJONI TAL-KUMITAT GHALL-BAGITS.....	69
PROCEDURA	78

ABBOZZ TA' RIŽOLUZZJONI LEĞIŽLATTIVA TAL-PARLAMENT EWROPEW

dwar il-proposta għal deciżjoni tal-Parlament Ewropew u tal-Kunsill li tistabbilixxi Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha u tal-harsien tal-konsumaturi (2007-2013) - Aspetti tas-sahħha (COM(2005) – C6-0097/2005 – 2005/0042A(COD))

(Proċedura ta' kodeċiżjoni: l-ewwel qari)

Il-Parlament Ewropew,

- wara li kkunsidra l-proposta tal-Kummissjoni lill-Parlament Ewropew u lill-Kunsill (COM(2005))¹,
- wara li kkunsidra l-Artikoli 251(2) u 152 tat-Trattat KE, skond liema artikoli l-Kummissjoni ppreżentat il-proposta lill-Parlament (C6-0097/2005),
- wara li kkunsidra d-deciżjoni tal-Konferenza tal-Presidenti tat-30 ta' Ĝunju, 2005 biex tinqasam il-Proposta għal deciżjoni tal-Parlament Ewropew u tal-Kunsill li tistabbilixxi Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha u tal-ħarsien tal-konsumaturi (2007-2013) sabiex tkun assenjata kemm lill-Kumitat għall-Ambjent, is-Sahħha Pubblika u s-Sikurezza ta' l-Ikel kif ukoll lill-Kumitat għas-Suq Intern u ghall-Harsien tal-Konsumatur għat-thejjija ta' żewġ rapporti separati;
- wara li kkunsidra l-Artikolu 51 tar-Regoli ta' Proċedura tieghu,
- wara li kkunsidra r-rapport tal-Kumitat għall-Ambjent, is-Sahħha Pubblika u s-Sikurezza ta' l-Ikel u l-opinjoni tal-Kumitat għall-Baġits (A6-0030/2005),
 1. Japrova l-proposta tal-Kummissjoni kif emendata;
 2. Jitlob lill-Kummissjoni sabiex terġa' tirreferi l-kwistjoni lill-Parlament jekk għandha l-ħsieb li temenda l-proposta b'mod sustanzjali jew li tibdilha b'test ieħor;
 3. Jagħti istruzzjonijiet lill-President tiegħu sabiex jgħaddi l-pożizzjoni tal-Parlament lill-Kunsill u lill-Kummissjoni.

Test propost mill-Kummissjoni

Emendi tal-Parlament

Emenda
Titolu

Proposta għal deciżjoni tal-Parlament Ewropew u tal-Kunsill li tistabbilixxi Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha **u tal-ħarsien tal-**

Proposta għal deciżjoni tal-Parlament Ewropew u tal-Kunsill li tistabbilixxi t-**tieni** Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha (2007-2013).

¹ ##.

konsumaturi (2007-2013).

Ġustifikazzjoni

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection Programme. This programme constitutes a continuation and development of the first integrated Community action programme in the field of public health (2003-2008).

Emenda 2 Ċitazzjoni 1

Wara li kkunsidraw it-Trattat li jistabbilixxi l-Komunità Ewropea, u b'mod partikolari ***l-Artikoli 152 u 153*** tiegħu,

Wara li kkunsidra t-Trattat li jistabbilixxi l-Komunità Ewropea, u partikolarment l-***Artikolu 152*** tiegħu,

Ġustifikazzjoni

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection Programme.

Emenda 3 Premessa 1

(1) Il-Komunità tista' tikkontribwixxi għall-harsien tas-sahħha, is-sikurezza ***u l-interessi ekonomiċi*** taċ-ċittadini permezz ta' azzjonijiet fl-oqsma tas-sahħha pubblika ***u l-harsien tal-konsumaturi***.

(1) ***Il-Komunità hija marbuta li tippromwovi u ttejjeb is-sahħha, li tipprevjeni u tnaqqas il-mard, u li tikkumbatti t-theddid potenzjali għas-sahħha. Hija għandha tindirizza l-preokkupazzjonijiet tal-pubbliku u l-aspettattivi tiegħu b'mod koordinat u koerenti.*** Il-Komunità tista' tikkontribwixxi għall-protezzjoni ***u s-sahħha taċ-ċittadini permezz ta' azzjonijiet fil-qasam*** tas-sahħha pubblika ***li jżidu l-valur ma' dawk ta' l-Istati Membri.***

Ġustifikazzjoni

Public health is a common good of prime importance and its protection concerns everyone without exception. Article 152 of the EC Treaty commits the Community to the promotion and improvement of health, the prevention of human illness and obviating sources of danger to human health. Meeting the challenges in the field of health calls for coordinated and cohesive measures to ensure a high level of protection of public health. A sound public health policy adapted to the challenges of the 21st Century must strive for a reduction of disease to avoid further health loss.

Emenda 4
Premessa 1 a (ġdida)

Għandu jkun assigurat livell ġholi ta' protezzjoni tas-sahħha fid-definizzjoni u l-implimentazzjoni tal-politika u l-attivitajiet kollha tal-Komunità. Skond l-Artikolu 152 tat-Trattat, il-Komunità hija mitluba li jkollha rwol attiv billi tieħu miżuri li ma jistghux jittieħdu minn Stati Membri individwali u billi tikkoordina miżuri meħuda mill-Istati Membri, skond il-principju tas-sussidjarjetà. Il-Komunità tirrispetta għal kollox il-prerogattivi ta' l-Istati Membri fl-organizzazzjoni u l-ghoti tas-servizzi tas-sahħha u tal-kura medika.

Ġustifikazzjoni

The Treaties require the Community to play an active role, by taking measures which cannot be taken by the Member States. The strengthened provisions of Article 152 of the Treaty of Amsterdam constituted a quantitative and qualitative leap forward in containing the three-fold objectives of improving public health, preventing disease in all its forms and obviating sources of danger. It should be noted that competence and responsibility for health services (hospitals etc.), lie with the Member States (subsidiarity principle).

Emenda 5
Premessa 1 b (ġdida)

(1b) Filwaqt li hi marbuta li thares u ttejjeb is-sahħha taċ-ċittadini tagħha, il-Komunità għandha wkoll tikkunsidra valuri etiċi, halli ma tmurx kontra l-kodiċijiet eżistenti ta' mgħiba.

Ġustifikazzjoni

A sentence in the preamble to the decision N:3.1 "Making European citizens healthier is the ultimate goal of all health activities pursued under the Treaty" needed clarification, since, legally and ethically, the goal cannot be pursued by all available means, which would ultimately lead to the improvement of citizens' health.

Emenda 6
Premessa 1 c (ġdida)

(1c) Is-settur tas-sahha huwa kkaratterizzat, minn naħa mill-potenzjal konsiderevoli li għandu biex jikber, ikun innovattiv u biex ikun dinamiku, u minn naħa l-oħra huwa kkaratterizzat mill-isfidi li qed jiffaċċa f'dik li hi s-sostenibilità finanzjarja u soċjali u fl-effiċjenza tas-sistemi tal-kura tas-sahha minħabba, fost affarijiet oħra, fiziż-żieda fil-medja ta' hajja u fl-avvanzi medici.

Justification

There have been rapid developments in the health sector in financial terms with an increase in investment and rising employment, as well as the introduction of technology and innovation, particularly in the developed countries. At the same time, there has been an increase in spending on health and health care of almost 10% of GDP of the Member States, taking into account the increase in life expectancy and the fact that the health sector constitutes an important part of the Member States' social security systems.

Emenda 7
Premessa 1 d (ġdida)

(1d) Il-programm ta' azzjoni Komunitarja fil-qasam tas-sahha pubblika (2003-2008) kien l-ewwel programm integrat tal-Komunità Ewropea f'dan il-qasam, u digà gab numru ta' zviluppi u diversi titjib.

Ġustifikazzjoni

The first integrated Community action programme in the field of public health is the programme in force for 2003-2008 and there is a clear difference in its entire philosophy compared with previous such initiatives in that, although in the past important health issues, such as the anti-cancer programme, health promotion, AIDS, drug addiction, health monitoring, injuries, rare diseases, pollution-related diseases, were being addressed, they were dealt with in a piecemeal manner, mainly in isolation from one another. This programme has three general objectives - (a) improving information, (b) strengthening the capacity for a rapid coordinated response to health threats and (c) the promotion of health and prevention of disease through addressing health determinants - and after two years of implementation, the first positive results have already been obtained with Community measures and the development of mechanisms on the basis of an integrated approach to public health.

Emenda 8
Premessa 1 e (ġdida)

(1e) Jeżistu numru ta' theddidiet għas-sahħha li huma transkonfinali u li għandhom possibilità li jieħdu dimensjoni dinjija u qiegħdin jitfaċċaw theddidiet għas-sahħha godda li jeħtieġu aktar azzjoni Komunitarja. Il-Komunità għandha tittratta t-theddidiet serji transkonfinali li hemm kontra s-sahħha bħala kwistjoni ta' priorità. Il-monitoraġġ, li ssir twissija minn kmieni u l-azzjoni biex tikkumbatti t-theddid serju għas-sahħha jitolbu mill-Komunità kapacità li tirrispondi b'mod effettiv u kkoordinat.

Ġustifikazzjoni

The successive food crises, the worldwide panic caused by SARS, which first appeared in China, avian influenza and the possibility of an influenza pandemic in the immediate future, which may claim millions of lives, and the environmental problems affecting public health highlight the exceptional importance of public health and, consequently, the importance of protecting it for citizens who are calling for effective action at Union level. Moreover, the mobility of European citizens and the freedom of movement of individuals within the EU call for vigilance in order to be alert to serious cross-border threats, and to give early warning of and combat such threats.

Emenda 9
Premessa 1 f (ġdida)

(1f) Skond ir-Rapport ta' l-2005 ta' l-Organizzazzjoni Dinjija tas-Sahħha (id-WHO) dwar is-Sahħha Ewropea, meta meqjusa skond is-Snin ta' Hajja Aġġustati għad-Diżabilità (DALYs) l-iktar kawzi importanti tal-piż ta' mard fir-Reġjun huma l-mard li ma jitteħidx (NCDs - 77% tat-total), kawzi esterni ta' ferment u vvelenar (14%) u mard li jittieħed (9%). L-34% l-ohra tad-DALYs fir-Reġjun huma ffurmati minn seba' kundizzjonijiet prinċipali - mard tal-qalb iskemiku, diżordnijiet depressivi unipolari, mard ċerebrovaskulari, diżordnijiet mill-užu ta' l-alcohol, mard pulmonari kroniku,

kanċer tal-pulmun u korrimenti minn inċidenti tat-traffiku. 60% tad-DALYs huma kkaġunati minn seba' fatturi ta' riskju prinċipali - it-tabakk, l-alkohol, il-pressjoni għolja, il-kolesterol għoli, il-piżżejjed, il-konsum baxx ta' frott u ħaxix u n-nuqqas ta' attivitā fizika. Barra minn dan, mard li jittieħed, bħal m'hi l-HIV/AIDS, l-influwenza, it-tuberkuloži u l-malarja wkoll qed isiru theddida għas-saħħha tan-nies kollha fl-Ewropa. Biċċa xogħol importanti tal-Programm għandha tkun li jkunu identifikati aħjar il-piżżejjiet prinċipali tas-saħħha fil-Komunità.

Justification

It is absolutely essential to take account of the WHO's authoritative data in drawing up the public health programme in the Union.

Emenda 10 Premessa 1 g (ġidida)

(1g) Tmien kawżi prinċipali ta' mwiet minn mard li ma jitteħid (NCDs) fir-Reġjun Ewropew ta' l-Organizzazzjoni dinjija tas-saħħha (id-WHO) huma l-mard kardjovaskulari, dīzordnijiet newropsikjatriċi, il-kanċer, mard tas-sistema digestiva, mard respiratorju, dīzordnijiet ta' l-organi tas-sensi, mard muskoluskeletal u d-diabete (diabetes mellitus). Barra minn hekk, is-sejbiet ta' studju reċenti bbażat fuq mudell ta' mard użat mid-WHO, jiissu għixerxi li l-mortalità li tista' tkun attribwita għad-dijabete x'aktarx li tkun oħla b'mod konsiderevoli mill-istimi globali ta' qabel li kienu bbażati fuq iċ-ċertifikati tal-mewt, ghax individwi bid-dijabete spiss hafna jmutu minħabba mard kardjovaskulari jew mard tal-kliewi.

Justification

This amendment is related to the previous amendment.

Amendment 11
Recital 1 h (new)

(1h) Id-dijabete u l-obezità huma theddidiet serji għac-ċittadini ta' l-Unjoni Ewropea u għalhekk il-Programm għandu jindirizza wkoll din il-kwistjoni importanti fuq il-bażi inter alia tal-ġbir u l-analizi ta' dejta rilevanti.

Emenda 12
Premessa 1 i (gdida)

(1i) Perċentwali għolja mill-kaži kollha tal-kanċer jistgħu jkunu evitati. Huwa meħtieg sforz kontinwu sabiex jissahħħa u jithaffex il-process fejn it-tagħrif dwar il-prevenzjoni u l-kontroll tal-kanċer jissarraf fazzjoni għas-saħħa pubblika.

Ġustifikazzjoni

According to WHO, cancer rates are set to increase dramatically due to Europe's ageing population and the rise of the cancer epidemic is attributed to increased exposure to tobacco use, unhealthy diet, physical inactivity, some infections and carcinogens. One in 3 Europeans is diagnosed with cancer and the disease kills 1 in 4 people in Europe. Prevention offers the most effective long-term strategy for the control of cancer.

For example the European Cancer Code could provide a new impetus to tackling cancer in new Member States which have the greatest cancer survival deficits.

Emenda 13
Premessa 1 j (gdida)

(1j) L-infezzjonijiet li jittieħdu waqt rikoveru fi sptar u r-rżistenza tal-mikrobi ghall-antibijotici qed isiru theddida għas-saħħa fl-Ewropa. In-nuqqas ta' riċerka għal antibijotici ġoddha kif ukoll l-użu kif għandu jkun ta' dawk eżistenti huma kawżei ta' thassib ewlenin. Għalhekk huwa importanti li tingħabar u tkun analizzata dejta rilevanti.

Emenda 14
Premessa 1 k (gdida)

*(1k) It-tishih ta' l-irwol tac-Ċentru
Ewropew ghall-Prevenzjoni u l-Kontroll
tal-Mard huwa importanti sabiex jitnaqqas
b'mod ċentrali l-impatt tal-mard li jittieħed.*

Ġustifikazzjoni

This amendment seeks to underline the important role of the ECDC.

Emenda 15
Premessa 2

(2) It is therefore appropriate to establish a programme of Community action on health **and consumer protection**, replacing Decision No 1786/2002/EC of the European Parliament and of the Council of 23 September 2002 adopting a programme of Community action in the field of public health (2003-2008) **and Decision No 20/2004/EC of the European Parliament and of the Council of 8 December 2003 establishing a general framework for financing Community actions in support of consumer policy for the years 2004 to 2007 These Decisions** should therefore be repealed. (2) Huwa għalhekk xieraq li jiġi stabbilit programm ta' azzjoni Komunitarja dwar is-saħħha **u l-harsien tal-konsumatur**, li jidħol minflok id-Deciżjoni 1786/2002/KE tal-Parlament Ewropew u tal-Kunsill tat-23 ta' Settembru 2002 li tadotta programm ta' azzjoni Komunitarju fil-qasam tas-saħħha pubblika (2003-2008)² **u d-Deciżjoni 20/2004/KE tal-Parlament Ewropew u tal-Kunsill tat-8 ta' Dicembru 2003 li tistabbilixxi qafas ġenerali sabiex jiġu ffinanzjati azzjonijiet Komunitarji b'appoġġ għall-politika dwar il-konsumaturi għas-snin 2004-2007³. Dawn id-Deciżjonijiet għandhom għalhekk jiġu rrevokati.**

(2) **Huwa meħtieġ sforz kontinwu sabiex jintlaħqu l-objettivi u l-miri li huma digħi stabbiliti mill-Komunità fil-qasam tas-saħħha pubblika.** Huwa għalhekk xieraq li jiġi stabbilit programm *ieħor* (it-tieni wieħed) ta' azzjoni Komunitarja dwar is-saħħha (2007-2013, "the Programme") **kif stipulat f'din id-Deciżjoni**, li jieħu post id-Deciżjoni 1786/2002/KE tal-Parlament Ewropew u tal-Kunsill tat-23 ta' Settembru 2002 li tadotta programm ta' azzjoni Komunitarju fil-qasam tas-saħħha pubblika (2003-2008), **li** għandhom għalhekk jiġu rrevokati.

² GU L 271, tad-9.10.2002, p. 1. Deciżjoni kif emodata bid-Deciżjoni 786/2004/KE (GU L 138, tat-30.4.2004, p. 7).

³ GU L 5, tad-9.1.2004, p. 1. Deciżjoni kif emodata bid-Deciżjoni 786/2004/KE.

Ġustifikazzjoni

This amendment is in accordance with the decision by the Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection Programme. The Community is facing serious challenges in the health sector which call for a response at Community level and, consequently, Community action is required in the form of a second programme in the field of health (2007-2013) which will constitute a continuation and development of the first integrated Community action programme in the field of public health (2003-2008).

Emenda 16 Premessa 2 a (ġdida)

(2a) Il-Programm jibni fuq l-istruttura, il-mekkaniżmi u l-attivitàjet tal-programm précédenti għal azzjoni Komunitarja fil-qasam tas-sahħha pubblika (2003-2008), u jżid objettivi u beneficiċċi ġodda mill-esperjenza u t-tagħrif akkwistat permezz ta' l-implementazzjoni ta' mizuri u azzjonijiet. Il-Programm għandu jikkontribwixxi għal livell għoli ta' saħħa fizika u mentali u aktar ugwaljanza fi kwistjonijiet ta' saħħa madwar il-Komunità kollha, billi l-azzjonijiet ikunu immirati lejn it-titjib tas-sahħha pubblika, il-prevenzjoni tal-mard u d-diszordnijiet tal-bniedem, u lejn l-gharrfien ta' għejjun ta' perikli għas-sahħha bl-iskop li jikkumbatti l-morbožità u l-mewt prematura, filwaqt li jikkunsidra s-sess tal-persuni, l-origini etnika u l-età.

Ġustifikazzjoni

The second programme will build on the structures, mechanisms and activities of the first programme, the experience gained and the addition of new objectives, contributing to combating health threats, attaining a high level of physical and mental health and well-being and greater equality in health matters.

Amendment 17 Recital 2 b (new)

(2b) Il-Programm għandu jagħmel enfasi fuq it-titjib tal-kundizzjoni tas-sahħha u fuq il-promozzjoni ta' stil ta' hajja b'saħħitha fost it-tfal u ż-żgħażaq.

Justification

Regarding the fact that the prevention of illnesses in adults can most effectively be achieved by adopting a healthy lifestyle from the early stages of life, it seems necessary to concentrate the resources of the Programme on improving the health of the young generations.

Emenda 18
Premessa 3

(3) Filwaqt li jżomm l-elementi ewlenin u l-ispeċificitajiet ta' azzjonijiet fis-sahha u l-harsien tal-konsumatur, programm integrat uniku għandu jgħin sabiex jiġi sfruttati għal kolloks is-sinerġi fl-ghanijiet u l-efficjenza fl-amministrazzjoni ta' azzjonijiet f'dawn l-oqsma.. L-ghaqda ta' attivitajiet tas-sahha u tal-harsien tal-konsumaturi fi programm wieħed għandha tħgħin sabiex jintlaħqu għanijiet kongunti dwar il-ħarsien taċ-ċittadini minn riskji u theddid, iż-żieda fil-kapaċità taċ-ċittadini sabiex ikollhom l-gharfien u l-opportunità li jagħmlu deciżjonijiet fl-interess tagħħom u l-appoġġ għall-inklužjoni ta' għanijiet ta' saħha u tal-konsumaturi fil-politika u l-attivitajiet kollha tal-Komunità. L-ghaqda ta' strutturi amministrattivi u sistemi għanda tippermetti implementazzjoni aktar effiċjenti tal-programm u tgħin sabiex isir l-ahjar użu tar-riżorsi Komunitarji disponibbli għas-sahha u l-harsien tal-konsumatur.

(3) Il-Programm għandu jgħin sabiex jintlaħqu għanijiet dwar il-ħarsien taċ-ċittadini minn riskji u theddid għas-sahha, inkluži dawk li huma barra mill-kontroll ta' l-individwi, bhal m'hu l-ivvizzjar għal mediciċini li jeħtieġ riċetta , u biex jgħinhom jagħmlu l-ahjar użu possibbli mil-livell ta' saħha fizika u mentali tagħhom, jipprovdilhom accċess ahjar għal informazzjoni dwar dawn it-tip ta' riskji u theddid, u b'hekk iż-żidu l-kapaċità tagħhom li jagħmlu deciżjonijiet li huma l-ahjar ghall-interessi tagħhom.

Ġustifikazzjoni

The programme should strengthen the capacity to provide citizens with information on health matters, broadening the scope of knowledge and choice.

Emenda 19
Premessa 3 a (ġdida)

(3a) Il-Programm għandu jagħti appoġġ b'mod li l-objettivi tas-sahha jitqiegħdu fuq quddiem nett f'kull politika u attivitā tal-Komunità.

Ġustifikazzjoni

The programme will cover and support the mainstreaming of health objectives in all Community policies and activities.

Emenda 20 Premessa 3 b (ġdida)

(3b) Li jiżdiedu s-Snin ta' Hajja b'Saħħitha (HLY), imsejħha wkoll l-indikatur ta' prospetti ta' għomor ħieles mid-dizabilità, permezz tal-harsien mill-mard u l-promozzjoni taż-żieda fil-ghomor fi stat tajjeb ta' saħha, huwa importanti għall-benesseri taċ-ċittadini ta' l-UE u jgħin biex ikunu issaċċjati l-isfidi tal-Process ta' Lizzbona rigward is-soċjetà tat-tagħrif u s-sostenibilità ta' finanzi pubblici li jinsabu taħt il-pressjoni ta' l-ispejjeż tal-kura tas-saħha u tas-sigurtà soċjali li kulma jmur dejjem jiżdiedu.

Ġustifikazzjoni

Health contributes to productivity, employment and consequently to economic growth. Investment in prevention improves not only health, but also the economy. The categories of health indicator (negative and positive) help to measure the population's level of health. According to the conclusions of the Lisbon Process, 'a major challenge will be to reduce the important differences between Member States in terms of life expectancy, incidence of major diseases and health capability. Modernising the health sector (...) can make a substantial contribution to sustain labour supply'.

Emenda 21 Premessa 3 c (ġdida)

(3c) It-tkabbir ta' l-Unjoni Ewropea ġab miegħu iż-żejed kawżi għat-thassib f'dawk li huma inugwaljanzi fis-sahha fi ħdan l-UE u dan x'aktarx li jkompli jispikka ma' kull tkabbir li jsir. Din il-kwistjoni għandha, għalhekk, tkun waħda mill-prioritajiet tal-Programm.

Ġustifikazzjoni

Enlargement has exacerbated inequalities in the health sector. There are currently major differences between the Member States and within them in terms of average

lifespan of citizens, their state of health and their access to care. These inequalities in turn lead to inequalities in growth and, consequently, it is essential that the programme takes measures to reduce them.

Emenda 22
Premessa 3 d (ġdida)

(3d) Il-Programm għandu jghin sabiex ikunu identifikati l-kawżi ta' inugwaljanzi fis-sahħha u jkun imheggieg, fost ħwejjeg oħra, it-tpartit ta' l-ahjar prattika biex jingħelbu.

Justification

The programme should focus, inter alia, on measures which help to reduce inequalities.

Emenda 23
Premessa 3 e (ġdida)

(3e) Huwa essenzjali li jsir, b'mod sistematiku, il-ġbir, l-ipproċessar u l-analizi ta' dejta komparabbi biex isir monitoraġġ effettiv ta' l-istat tas-sahħha fl-Unjoni Ewropea. Dan għandu jagħti l-abilità lill-Kummissjoni u lill-Istati Membri li jtejbu l-informazzjoni lill-pubbliku u li jifformulaw strategi političi u azzjonijiet adattati sabiex jilħqu livell ġħoli fil-protezzjoni tas-sahħha tal-bniedem. Kemm fl-azzjonijiet kif ukoll fil-miżuri ta' appoġġ għandhom ikunu segwiti l-kompatibilità u l-interoperabilità tas-sistemi u tal-konnessjonijiet għat-partit ta' informazzjoni u dejta għall-izvilupp tas-sahħha pubblika. Is-sess tal-pesuni, l-età u l-origini etnika huma kunsiderazzjonijiet importanti tas-sahħha. Għalhekk, dejta rilevanti għandha tkun analizzata għal din ir-raġuni.

Ġustifikazzjoni

Without systematic collection, processing and analysis of data at Community level, there can be no effective monitoring of health. It is therefore essential to draw on objective, reliable, compatible, comparable and exchangeable information at Community level. It is equally important that compatible and interoperable systems and networks are operating in the health sector.

Emenda 24
Premessa 3 f (ġdida)

(3f) Il-ġbir tad-dejta jrid ikun skond id-dispożizzjonijiet legali rilevanti dwar il-protezzjoni tad-dejta personali.

Emenda 25
Premessa 3 g (ġdida)

(3g) L-aktar għażla adattata tkun li tittieħed drawwa tajba ghax il-promozzjoni tas-sahħha, il-prevenzjoni u l-kura tal-mard u l-ġrieħi għandhom jitkej lu fuq il-baži ta' effiċjenza u ta' effikaċċja u mhux biss fuq baži ekonomika. Għalhekk huwa ta' importanza primarja li jiġu stabiliti linji gwida u indikazzjonijiet u jiġi organizzat tpartit ta' l-aħjar drawwiet.

Justification

The development of best practice and guidelines is the best option for prevention measures in the field of health, treatment of diseases and injuries and is in keeping with the subsidiarity principle.

Emenda 26
Premessa 3 h (ġdida)

Huwa importanti li jiġu promossi l-aħjar drawwiet u li jiġu promossi l-aħħar metodi ta' kura ghall-mard u l-ġrieħi sabiex jiġi evitat aktar deterjorament tas-sahħha, u biex jiġu żviluppati ċentri ta' referenza għal kondizzjonijiet spċifici. Huwa importanti wkoll li jiġu promossi alternattivi tajba, li

jistgħu jieħdu preferenza għal raġunijiet soċjali, etiċi u raġunijiet inidvidwali ohra.

Justification

It is important to take into account that medical care is so good now that someone may choose a method of treatment, because of social, religious or other individual preferences, which is not, objectively, exactly as good as another. For instance, someone dying of cancer may prefer to be close to relatives rather than prolong his/her life; someone may choose, on religious grounds, not to accept a blood donation.

Emenda 27 Premessa 3 i (ġdida)

Biex jiġu evitati incidenti għandha tittieħed azzjoni billi tingabar dejta, billi jiġu żviluppati r-raġunijiet għala jseħħu l-incidenti u billi titqassam informazzjoni rilevanti.

Emenda 28 Premessa 3 j (ġdida)

(3j) Il-Programm għandu jagħti kontribut fil-għbir tad-dejta u l-promozzjoni ta' politika rilevanti dwar il-mobilità tal-pazjenti kif ukoll dwar il-mobilità ta' professionisti fil-kamp tas-sahħha. Għandu jiffaċilita l-avvanz taz-Zona Ewropea ta' l-e-Health u b'mod specċjali l-avvanz tal-karta ta' l-assikurazzjoni tas-sahħha. Ewropea permezz ta' inizjattivi Ewropej kongunti ma' oqsma ohra ta' politika ta' l-UE, filwaqt li tistabbilixxi kriterji stretti ta' kwalità għal siti elettroniċi dwar is-sahħha.

Justification

The mobility of patients and health professionals is a basic challenge in the health sector in the Union. In the light of the case law of the Court of Justice of the

European Communities, which recognises the right of patients to the refund of medical expenses incurred in another Member State but distinguishes between hospital and non-hospital care and links the exercise of this right with certain conditions to ensure financial balance and social security with the aim of safeguarding a high level of health protection, Community action is required to deal with the issues associated with patient mobility and the promotion of the e-health initiatives and, in particular the further development of the 'European health insurance card'.

The internet may have considerable added value in offering a platform providing for complementary health related information and services. However, the programme should provide for the necessary measures establishing quality criteria for health related websites in order to assure that the European e-Health area provides reliable and safe health related information and services.

Emenda 29
Premessa 3 k (ġdida)

(3k) Il-promozzjoni ta' applikazzjonijiet tat-telemediċina jistgħu jikkontribwixxu ghall-mobilità tal-pazjenti u ghall-kura medika ġewwa d-djar, b'hekk titnaqqas il-pressjoni fuq il-kura primarja u jitnaqqas il-piż-kawża tal-mard u l-ġrieħi.

Justification

Telemedicine applications promote patients' mobility, facilitating their prompt and appropriate access to health services while, at the same time, helping to reduce the impact of disease and injury, and rationalising expenditure in the health sector.

Emenda 30
Premessa 3 1 (ġdida)

(3l) It-tniġġis ta' l-ambjent huwa ta' periklu għas-sahha u huwa sugġett li jinkwieta liċ-cittadini Ewropej. Inizjattivi speċjali għandhom jiffukaw fuq it-tfal u gruppi oħra li huma partikolarmen vulnerabbli għal kondizzjonijiet ambjentali perikoluži. Il-Programm għandu jikkomplementa l-azzjonijiet meħħuda skond il-Pjan ta' Azzjoni dwar l-Ambjent u s-Sahha ta' l-2004-2010.

Emenda 31
Premessa 3 m (ġdida)

(3m) Il-Programm għandu wkoll jikkunsidra wkoll il-mard relatat mas-sess (bħal kanċer tas-sider, kanċer tal-prostata, osteoporozi, ecc).

Justification

Many illnesses of high prevalence are gender-specific, therefore it is necessary to address these specifically.

Emenda 32
Premessa 3n (ġdida)

(3n) Il-Programm għandu jgħin fil-ġlieda kontra l-preġudizzji minħabba s-sess u l-età fil-qasam ta' kura medika tal-pazjenti, f'sistemi ta' kura tas-sahħha, fir-riċerka u l-politika tal-Gvern.

Justification

One of the common objectives of the programme should be to reduce inequality between men and women in health care.

Emenda 33
Premessa 3 o (ġdida)

Fatturi relatati mas-sahħha li qed jikkontribwixxu għal tnaqqis fir-rata tat-twelid fl-Ewropa għandhom ikunu wkoll indirizzati b'mod xieraq.

Justification

The age-related decline in fertility, along with a lack of access to adequate intervention for those who may benefit, is likely to exacerbate the impact on populations in Europe, and further contribute to the associated problems of Europe's changing demographics. The Community should commit to recommending and supporting fair and equitable access to appropriate services across Europe in an effort to reverse the trend in falling birth rates and avert this pending population crisis.

Amendment 34
Recital 3 p (new)

Il-principju ta' prekawzjoni u evalwazzjoni ta' riskju huma fatturi principali ghall-ħarsien tas-sahħha tal-bniedem għalhekk għandhom ikunu integrati aktar f'politika tal-Komunità u f'attivitajiet oħra.

Emenda 35
Premessa 3 q (ġdida)

Sabiex jiġi żgurat livell għoli ta' koordinazzjoni bejn l-attivitajiet u l-inizjatti tal-Komunità u ta' l-Istati Membri fl-implementazzjoni tal-Programm, huwa neċessarju li tiġi promossa l-koperazzjoni bejn l-Istati Membri u li tittejjeb l-effikaċċja ta' networks eżistenti u futuri fil-kamp tas-sahħha pubblika.

Justification

Coordination and cooperation between the Commission and the Member States is absolutely essential for effective implementation of the programme.

Emenda 36
Premessa 3 r (ġdida)

Il-partecipazzjoni ta' awtoritatijiet nazzjonali, reġjonali u lokali fil-livell xieraq bi qbil mas-sistemi nazzjonali għandhom ikunu kkunsidrati fil-kuntest ta' l-implementazzjoni tal-Programm.

Emenda 37
Premessa 4

Il-Politika dwar is-sahħha u dik dwar il-protezzjoni tal-konsumatur jaqsmu għanji komuni marbuta mal-ħarsien mir-riskji, mat-titjib tad-deċizjonijiet taċ-

imħassar

cittadini u mal-integrazzjoni tal-interessi tas-sahha u tal-protezzjoni tal-konsumatur fl-oqsma kollha ta' politika Komunitarja, kif ukoll strumenti komuni bhal ma huma l-komunikazzjoni, l-izvilupp ta' kapaċita għas-socċeta civili fir-rigward ta' kwistjonijiet ta' saħha u protezzjoni tal-konsumatur, u l-promozzjoni ta' kooperazzjoni internazzjonali fuq dawn il-kwistjonijiet. Kwistjonijiet bħalma huma d-dieta u l-obeżità, it-tabakk u għażiex ohra marbuta mal-konsum li għandhom x'jaqsmu mas-sahha huma eżempji ta' kwistjonijiet multi-settorjali li jaffettwaw kemm is-sahha kif ukoll il-protezzjoni tal-konsumaturi. Strategija kongunta għal dawn l-ghanijiet u strumenti komuni se tippermetti attivitajiet komuni kemm għas-sahha kif ukoll ghall-protezzjoni tal-konsumaturi sabiex jiġu eżegwiti b'mod aktar effiċjenti u effettiv. Hemm ukoll għanijiet separati marbuta għal kull wieħed miż-żewġ oqsma tas-sahha u tal-protezzjoni tal-konsumatur li għandhom jiġi indirizzati permezz ta' azzjonijiet u strumenti spċċifici għal kull wieħed minn dawn iż-żewġ oqsma.

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme.

Emenda 38 Premessa 5

(5) Il-koordinazzjoni ma' oqsma oħra ta' politika u programmi Komunitarji hija parti ewlenija ta' l-għan **kongunt** ta' l-inklużjoni tal-politika tas-sahha u **dik dwar il-konsumatur f'oqsma** oħra ta' politika.

Sabiex jiġu promossi sinergiji u tīgi evitata d-duplikazzjoni, se jsir użu xieraq ta' fondi u programmi oħra Komunitarji inkluži l-programmi ta' qafas tal-Komunità għar-ričerka u r-riżultati tagħhom, il-Fondi Strutturali, u l-Programm Komunitarju ta'

(5) Il-koordinazzjoni ma' oqsma oħra ta' politika u programmi Komunitarji hija parti ewlenija ta' l-għan ta' l-inklużjoni tal-politika tas-sahha f'oqsma oħra ta' politika. Sabiex jiġu promossi sinergiji u tīgi evitata d-duplikazzjoni, **ser jittieħdu azzjonijiet kongunti ma' programmi u azzjonijiet Komunitarji relatati u** se jsir użu xieraq ta' fondi u programmi oħra Komunitarji inkluži l-programmi ta' qafas tal-Komunità għar-ričerka u r-riżultati tagħhom, il-Fondi Strutturali, u l-Programm Komunitarju ta'

Statistika.

Strutturali, *il-Fond ta' Koeżjoni, il-Fond Ewropew ghall-Gwida Agrikola u l-Garanzija* u l-Programm Komunitarju ta' Statistika. *Għandu jkun żgurat li l-aspett tas-sahħha jkun inkorporat.*

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection programme. It is essential to aim for synergy between the actions under the programme and other Community programmes, actions and funds.

Emenda 39
Premessa 5 a (ġdida)

(5a) Huwa necessarju li jiżdied l-investiment ta' l-UE fil-qasam tas-sahħha u ta' progetti relatati mas-sahħha. F'dan ir-riġward, l-Istati Membri għandhom jagħtu prioritā lill-avvanz tas-sahħha fil-programmi nazzjonali. Hemm bżonn ta' aktar għarfien dwar il-possibilitajiet ta' fondi mill-UE għas-sahħha. Hemm bżonn ta' inkoraġġiment sabiex isir tpartit ta' esperjenza bejn l-Istati Membri dwar l-iffinanzjar tas-sahħha permezz tal-Fondi Strutturali.

Justification

In order to finance health through structural funds health has to be included as a priority in Member States' national programmes. Awareness among the population needs to be raised as there is not enough information about this possibility.

Emenda 40
Premessa 6

(6) Huwa ta' interess ġenerali Ewropew li l-interessi tas-sahħha, tas-sigurtà u l-interessi ekonomici tac-ċittadini, kif ukoll l-interessti tal-konsumatur fl-iżvilupp ta' standards ghall-prodotti u għas-servizzi, ikunu rrappreżentati fuq livell Komunitarju. L-ghanijiet prinċipali tal-programm jistgħu

(6) Għaqdiet mhux governattivi u netwerks speċjalizzati wkoll għandhom rwol importanti fil-promozzjoni tas-sahħha pubblika u fir-rapprezentazzjoni ta' l-interessi tac-ċittadini marbuta mal-politika Komunitarja dwar is-sahħha. Għandhom bżonn kontribuzzjonijiet Komunitarji sabiex

jiddependu wkoll fuq l-eżistenza ta' netwerks speċjalizzati li jehtieġu wkoll kontribuzzjonijiet Komunitarji sabiex ikunu jistgħu jiżviluppaw u jaħdmu. Minhabba n-natura partikolari ta' l-għaqdiet ikkonċernati u fkażi jiet ta' utilità eċċezzjonal, it-tiġdid ta' l-appoġġ Komunitarju għall-operat ta' dawn l-organizzazzjonijiet m'għandux jiddependi fuq il-prinċipju ta' tnaqqis sistematiku tal-livell ta' appoġġ Komunitarju.

ikunu jistgħu jiżviluppaw u jaħdmu. *Din id-Deċiżjoni għandha tistabbilixxi l-kriterji ta' eligibilità u d-dispożizzjonijiet li jirrigwardaw it-trasparenza finanzjarja ta' għaqdiet mhux governattivi u netwerks speċjalizzati, sabiex dawn jikkwalifikaw ghall-appoġġ Komunitarju.* Minħabba n-natura partikolari ta' l-għaqdiet ikkonċernati u fkażi jiet ta' utilità eċċezzjonal, it-tiġdid ta' l-appoġġ Komunitarju għall-operat ta' dawn l-organizzazzjonijiet m'għandux jiddependi fuq il-prinċipju ta' tnaqqis sistematiku tal-livell ta' appoġġ Komunitarju.

Justification

NGOs and specialised networks play an important role in promoting health and, consequently should take part in the programme.

Emenda 41 Premessa 7

(7) L-implementazzjoni tal-programm għandha tibni u żżid ma' azzjonijiet esistenti u arranġamenti strutturali fil-qasam tas-saħħa pubblika u l-protezzjoni tal-konsumatur kif ukoll l-Aġenzija Eżekuttiva għall-Programm tas-Saħħa Pubblika mwaqqfa mid-deċiżjoni tal-Kunsill 2004/858/KE. *L-implementazzjoni għandha ssir b'kooperazzjoni mill-qrib ma' l-għaqdiet u l-agenziji rilevanti, b'mod partikolari maċ-Ċentru Ewropew għall-Prevenzjoni tal-Mard mwaqqaf mir-Regolament (KE) 851/2004 tal-Parlament Ewropew u tal-Kunsill.*

(7) L-implementazzjoni tal-**Programm** għandha *tinkludi* l-Aġenzija Eżekuttiva għall-Programm tas-Saħħa Pubblika mwaqqfa mid-deċiżjoni tal-Kunsill 2004/858/KE kif ukoll b'kooperazzjoni mill-qrib ma' l-għaqdiet u l-agenziji rilevanti, b'mod partikolari maċ-Ċentru Ewropew għall-Prevenzjoni tal-Mard (ĊEPM) mwaqqaf mir-Regolament (KE) 851/2004 tal-Parlament Ewropew u tal-Kunsill. *Il-Kummissjoni għandha tikkomika liċ-CEPM kull informazzjoni u dejta miġbura permezz tal-Programm rilevanti għall-missjoni tagħha.*

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection programme. It is important that the Commission should cooperate and communicate with the European Centre for Disease Prevention and Control.

Emenda 42

Premessa 9

(9) Il-Ftehim dwar iż-Żona Ekonomika Ewropea (minn hawn 'il quddiem msejjaḥ il-Ftehim ŻEE) jaħseb ghall-koperazzjoni **fl-oqsma tas-sahħha u tal-protezzjoni tal-konsumatur** bejn il-Komunità Ewropea u l-Istati Membri tagħha minn naħa u l-pajjiži ta' l-Assoċjazzjoni Ewropea ghall-Kummerċ Hieles li jipparteċipaw fiż-Żona Ekonomika Ewropea (minn hawn 'il quddiem msejjha l-pajjiži EFTA/ŻEE), min-naħa l-ohra Għandu wkoll jinhaseb biex il-programm jinfetah ghall-parċeċċapazzjoni minn pajjiži oħra, partikolarmen il-pajjiži girien tal-Komunità, pajjiži li qed japplikaw għas-shubija, kandidati għal jew li deħlin ghall-adeżjoni mal-Komunità, filwaqt li jitqies partikolarmen il-potenzjal li theddid għas-sahħha riżultanti f'pajjiži oħra jkollu impatt fil-Komunità.

Il-Ftehim dwar iż-Żona Ekonomika Ewropea (minn hawn 'il quddiem msejjaḥ il-Ftehim ŻEE) jaħseb ghall-koperazzjoni **fl-oqsma tas-sahħha bejn il-Komunità Ewropea u l-Istati Membri tagħha minn naħa u l-pajjiži ta' l-Assoċjazzjoni Ewropea ghall-Kummerċ Hieles li jipparteċipaw fiż-Żona Ekonomika Ewropea (minn hawn 'il quddiem msejjha l-pajjiži EFTA/ŻEE), min-naħha l-ohra Għandu wkoll jinhaseb biex **il-Programm** jinfetah ghall-parċeċċapazzjoni minn pajjiži oħra, partikolarmen il-pajjiži girien tal-Komunità, pajjiži li qed japplikaw għas-shubija, kandidati għal jew li deħlin ghall-adeżjoni mal-Komunità, filwaqt li jitqies partikolarmen il-potenzjal li theddid għas-sahħha riżultanti f'pajjiži oħra jkollu impatt fil-Komunità.**

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection Programme.

Emenda 43 Premessa 11

(11) Huwa xieraq li tīgħi żviluppata kooperazzjoni ma' organizzazzjonijiet internazzjonali rilevanti bħalma huma n-Nazzjonijiet Uniti u l-aġenzijsi speċjalizzati tagħha inkluża l-Organizzazzjoni Dinjija tas-Sahħha, kif ukoll mal-Kunsill ta' l-Ewropa u mal-Organizzazzjoni għall-Kooperazzjoni u l-Iżvilupp Ekonomiku **bil-hsieb li jiġi implementat il-programm permezz tal-massimizzazzjoni ta' l-effettività u l-effiċċjenza ta' azzjonijiet marbuta mas-sahħha u l-protezzjoni tal-konsumatur fuq livell Komunitarju u internazzjonali, filwaqt li jitqiesu l-kapaċitajiet u r-rwoli partikolari ta' l-organizzazzjonijiet differenti.**

(11) **Sabiex tīgħi massimizzata l-effettività u l-effiċċjenza ta' azzjonijiet marbuta mas-sahħha fuq livell Komunitarju u internazzjonali** huwa xieraq li tīgħi żviluppata kooperazzjoni ma' organizzazzjonijiet internazzjonali rilevanti bħalma huma n-Nazzjonijiet Uniti u l-aġenzijsi speċjalizzati tagħha inkluża l-Organizzazzjoni Dinjija tas-Sahħha, kif ukoll mal-Kunsill ta' l-Ewropa u mal-Organizzazzjoni għall-Kooperazzjoni u l-Iżvilupp Ekonomiku.

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme.

Emenda 44

Premessa 12

(12) Sabiex jiżdied il-valur u l-impatt tal-programm għandu jkun hemm monitoraġġ u evalwazzjoni regolari, inkuži evalwazzjonijiet esterni u indipendentni tal-miżuri meħuda.

(12) *Il-progress sabiex jintlahqu l-objettivi relatati mas-sahha f'dan il-Programm għandu jkun imkejjel u evalwat sabiex jiżdied il-valur u l-impatt tal-Programm. Għandu jkun hemm monitoraġġ u evalwazzjoni regolari, inluzi evalwazzjonijiet esterni u indipendentni tal-miżuri meħuda.*

Emenda 45

Premessa 13

(13) Billi l-għanijiet ta' l-azzjoni li trid tittieħed dwar is-sahha u l-protezzjoni tal-konsumatur ma jistgħux jinkisbu b'mod sodisfaċenti mill-Istati Membri minħabba n-natura transnazzjonali tal-kwistjonijiet involuti, u għaldaqstant jistgħu, minħabba l-potenzjal li azzjoni Komunitarja tkun aktar effiċjenti u effetiva minn azzjoni nazzjonali fil-harsien ta' l-interessi tas-sahha, tas-siġurta u l-interessi ekonomici taċ-ċittadini, jinkisbu aħjar fuq livell Komunitarju, il-Komunità tista' tadotta miżuri, skond il-principju tas-sussidjarjetà kif stabbilit fl-Artikolu 5 tat-Trattat. *Bi qbil mal-principju ta' proporzjonalità, kif stabbilit f'dak l-Artikolu, din id-deċiżjoni ma tmurx lilhinn minn dak li huwa meħtieġ sabiex jintlahqu dawk l-ghanijiet.*

(13) *Skond il-principji ta' sussidjarjetà u proporzjonalità kif stabbiliti fl-Artikolu 5 tat-Trattat, azzjonijiet Komunitarji li ma jaqgħux taħbi il-kompetenza esklużiva tal-Komunità, bħal dawk fil-kamp tas-sahha pubblika, għandhom isiru biss u sakemm minħabba l-iskala ta' l-azzjonijiet jew l-effetti tagħhom l-ghanijiet jistgħu jintlahqu aħjar mill-Komunità. L-ghanijiet tal-Programm ma jistgħux jinkisbu b'mod sodisfaċenti mill-Istati Membri minħabba n-natura tranznazzjonali kumplessa u minħabba n-nuqqas ta' kontroll dirett ta' l-Istati Membri fuq il-fatturi li jaffettaww is-sahha, għaldaqstant il-Programm għandu jappoġġa u jikkomplimenta l-azzjonijiet u l-miżuri ta' l-Istati Membri. Il-Programm jista' jipprovd i valur miżjud sinifikanti lill-promozzjoni tas-sahha u lill-istrutturi tas-sahha fil-Komunità bl-appoġġ ta' strutturi u programmi li jkabbru l-valur tal-kapaċitajiet ta' l-individwi, ta' l-istitutzzjonijiet, ta' l-assoċċazzjonijiet, ta' l-organizzazzjonijiet u ta' korpi fil-kamp tas-sahha billi jħaffef it-partit ta' l-*

esperjenzi u l-ahjar drawwiet u billi jipprovdi baži għal analizi komuni tal-fatturi li jolqtu s-saħħha pubblika. Aktar minn hekk, il-Programm jista' jkun li zied il-valur fil-każ ta' theddid tranzkonfinali lis-saħħha pubblika, bħal mard infettiv, tniġgis ta' l-ambjent jew kontaminazzjoni ta' l-ikel, sal-punt li jagħtu lok għal strateġiji u azzjonijiet komuni bil-ghan li tithares is-saħħha u s-sikurezza, li jiġu promossi l-interessi ekonomiċi relatati mas-saħħha taċ-ċittadini u li jitnaqqas il-piż ekonomiku fuq il-pazjenti li huma ċittadini Ewropej.

Justification

This amendment is in accordance with the decision by the Conference of Presidents to split the programme. The Health Programme should also deal with aspects relating to the role of citizens as patients in the reception of health services. The actions under the programme may encourage cooperation between the Member States on cross-border care in order to ensure effective or urgent treatment and the promotion of patients' health with a view to improving the complementarity of health services in border regions.

Emenda 46 Premessa 13 a (gdida)

13(a) Skond l-Artikolu 2 tat-Trattat li jistabbilixxi bħala prinċipju ta' l-Unjoni Ewropea l-ugwaljanza bejn in-nisa u l-irġiel u skond l-Artikolu 3(2) li jistabbilixxi li l-Komunità għandha tfittex li tneħħi l-inugwaljanzi u li tippromwovi l-ugwaljanza bejn in-nisa u l-irġiel f'kull attivitā tal-Komunità inkluz il-kisba ta' livell għoli ta' harsien tas-saħħha, kull objettiv u kull azzjoni li taqa' taħt il-programm ta' azzjoni tal-Komunità fil-kamp tas-saħħha se tippromwovi ftehim u għarfien ahjar tal-bżonnijiet rispettivi ta' l-irġiel u n-nisa u l-attitudni għas-saħħha.

Justification

By Treaty provision [Articles 2 and 3(2) EC] and according to the Community commitments for gender mainstreaming, gender must be explicitly referred to in the

programme which objective is to contribute to a high level of health protection. Therefore, the proposed Recital should be introduced on the same level as the subsidiarity and proportionality EC Treaty principles.

Emenda 47
Premessa 14

Il-Kummissjoni għandha tiżgura tranzizzjoni xierqa bejn ***dan il-programm*** u ż-żewġ programmi li dan qed jidħol minnflokhom, partikolarmen fir-rigward ***tal-kontinwità ta' mizuri multi-annwali u strutturi ta' appoġġ amministrattiv bħalma hija l-Aġenzija Eżekuttiva ghall-Programm ta' Sahħha Pubblika.***

Il-Kummissjoni għandha tiżgura tranzizzjoni xierqa bejn ***dan il-Programm*** u l-ewwel Programm li dan qed jidħol minnfloku, partikolarmen fir-rigward ***tal-konklużjoni ta' l-obligazzjonijiet finanzjarji meħuda.***

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme.

Emenda 48
Artikolu 1

L-istabbiliment tal-Programm

Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha ***u l-protezzjoni tal-konsumatur*** li jkopri l-perjodu mill-1 ta' Jannar 2007 sal-31 ta' Dicembru 2013, minn issa 'l quddiem imsejjah "il-programm" huwa b'dan stabbilit.

L-istabbiliment tat-***Tieni*** Programm

It-Tieni Programm ta' azzjoni Komunitarja fil-qasam tas-sahħha li jkopri l-perjodu mill-1 ta' Jannar 2007 sal-31 ta' Dicembru 2013, minn issa 'l quddiem imsejjah "il-Programm" huwa b'dan stabbilit.

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection programme.

Emenda 49
Artikolu 2

1. Il-programm se jikkomplementa ***u*** jappoġġa l-politika ta' l-Istati Membri u se jikkontribwixxi għall-ħarsien tas-sahħha, is-sikurezza ***u l-interessi ekonomiċi taċ-ċittadini.***

Il-programm se jikkomplementa, jappoġġa ***u jżid fil-valur*** tal-politika ***tal-Komuintà*** u ta' l-Istati Membri u se jikkontribwixxi għall-ħarsien ***u l-promozzjoni tas-sahħha u s-sikurezza tal-bniedem, tal-mard u l-incidenti u jtejjeb is-sahħha pubblika.***

2. L-ghan imsemmi fil-paragrafu 1 se jissegwa permezz ta' miri komuni flimkien ma' miri specifiċi fl-oqsma tas-sahħha u tal-protezzjoni tal-konsumatur.

(a) Il-miri komuni għas-sahħha u l-protezzjoni tal-konsumatur li għandhom jissegwew permezz ta' l-azzjonijiet u l-strumenti msemmija fl-Anness 1 ta' din id-Deciżjoni sejkun:

- li ċ-ċittadini jitharsu mir-riskji u t-theddid li m'humiex fil-kontroll ta' individwi;
- li tiżdied il-kapaċità taċ-ċittadini li jieħdu deċiżjonijiet ahjar fir-rigward ta' saħħithom u ta' l-interessi tagħhom bħala konsumaturi;
- u li l-għaniġiet ta' politika ta' saħħha u tal-konsumatur jiġu ppopolarizzati.

Il-miri **specifiċi għas-sahħha** li għandhom jissegwew permezz ta' l-azzjonijiet u l-strumenti msemmija fl-Anness 2 ta' din id-Deciżjoni sejkun:

- li ċ-ċittadini jitharsu minn theddid għas-sahħha;
- li tiġi promossa politika li twassal għal stil ta' hajja f'qagħda ta' saħħha ahjar;
- li jingħata kontribut għat-tnaqqis ta' l-okkorenza tal-mard ewljeni;
- **u** li tittejjeb l-effiċjenza u l-effetivitā fis-sistemi tas-sahħha.

(c) Il-miri specifiċi ghall-protezzjoni tal-konsumatur li għandhom jissegwew permezz ta' l-azzjonijiet u l-strumenti msemmija fl-Anness 3 ta' din id-Deciżjoni sejkun:

- *għarfiem ahjar dwar il-konsumaturi u s-swiegħ;*
- *regolamentazzjoni ahjar dwar il-*

—

—

—

Il-miri li għandhom jissegwew permezz ta' l-azzjonijiet u l-strumenti msemmija **fl-Anness** ta' din id-Deciżjoni sejkun:

- to protect citizens against health threats
- li tiġi promossa politika li twassal għal stil ta' hajja f'qagħda ta' saħħha ahjar;
- li jingħata kontribut għat-tnaqqis tal-morbożitā u tar-rata ta' mwiet tal-mard ewljeni;
- li tittejjeb l-effiċjenza u l-effetivitā fis-sistemi tas-sahħha; **u**
- *li tittejjeb l-informazzjoni u l-gharfien ghall-iżvilupp tas-sahħha pubblika u biex tikkontribwixxi għall-popolarizzazzjoni ta' objettivi tas-sahħha.*

protezzjoni tal-konsumaturi;

- *infurzar, monitoraġġ u rimedjar ahjar;*
- *u konsumaturi aktar infurmati, edukati u responsabili.*

Justification

This amendment is in accordance with the decision by the Conference of Presidents to split the programme. Consequently, it is necessary to modify the aims and objectives of the programme to correspond to Article 152 of the EC Treaty. The actions corresponding to the objectives are presented in the Annex. This is an essential addendum in order to clarify the definition of the aims and objectives of the programme. A notable addendum is the reduction in the mortality and morbidity of major diseases and injuries.

Emenda 50 Artikolu 2, paragrafu 2 a (ġdid)

2a. Il-Programm għandu jikkontribwixxi aktar biexl:

(a) ikun żgurat livell għoli ta' protezzjoni tas-sahħha tal-bniedem fid-definizzjoni u l-implementazzjoni ta' kull politika u attivitā tal-Komunità permezz tal-promozzjoni ta' attitudni multidimensjonali għas-sahħha;

(b) ikunu indirizzati l-inugwaljanzi ta' kull tip fil-kamp tas-sahħha li jeżistu qalb u fl-Istati Membri sabiex iċ-ċittadini kollha ta' l-UE jkollhom aċċess għal kura tas-sahħha ta' standard komparabbi, u dan mingħajr distinzjoni fuq baži ta' sess, età, origini etnika, edukazzjoni jew post ta' residenza;

(c) tkun imheġġa l-koperazzjoni bejn l-Istati Membri fl-oqsma ikkontemplati fl-Artikolu 152 tat-Trattat u biex iċ-ċittadini jingħataw aktar setgħa billi tithaffef il-mobilità tal-pazjent u tiżdied it-trasparenza bejn is-sistemi tas-sahħha tal-pajjiżi differenti;

Emenda 51
Artikolu 3, paragrafu 1, parti introduttoria

1. Azzjonijiet b'segwitu għall-għanijiet u l-miri stipulati fl-Artikolu 2 se jużaw bis-shiħ il-metodi xierqa ***disponibbli*** ta' l-implimentazzjoni, inkluži partikolarment:

1. Azzjonijiet b'segwitu għall-għanijiet u l-miri stipulati fl-Artikolu 2 se jużaw bis-shiħ il-metodi xierqa ***u l-iffinanzjar adottat skond il-proċedura ta' l-immaniġġjar imsemmija fl-Artikolu 6(2)***, inkluž partikolarment:

Justification

This amendment is in accordance with the decision by the Conference of Presidents to split the programme. The methods of implementing the programme and the terms of funding will be defined by the programme's management committee.

Emenda 52
Artikolu 3, paragrafu 2, punt (a)

(a) 60% għal azzjoni maħsuba biex tgħin sabiex jintlaħaq għan li jagħmel parti mill-politika Komunitarja fil-kamp tas-sahħha ***u tal-protezzjoni tal-konsumatur***, minbarra f'kaži ta' utilità eċċezzjonali fejn il-kontribut Komunitarju mhux se jaqbeż it-80%; u,

(a) 60% għal azzjoni maħsuba biex tgħin sabiex jintlaħaq għan li jagħmel parti mill-politika Komunitarja fil-kamp tas-sahħha minbarra f'kaži ta' utilità eċċezzjonali fejn il-kontribut Komunitarju mhux se jaqbeż it-80%; u,

Justification

This amendment is in accordance with the decision of Conference of Presidents to split the programme into two parts.

Emenda 53
Artikolu 3, paragrafu 2, punt (b)

(b) 60% tan-nefqa għall-operat ta' ***korp li jsegwi għan ta' interess ġenerali Ewropew fejn appoġġ bħal dan huwa meħtieġ sabiex jiżgura rappreżentazzjoni ta' l-interessi tas-sahħha u tal-konsumaturi fuq livell Komunitarju jew sabiex jiġu implementati miri ewlenin tal-programm, minbarra fil-kazijiet ta' utilità eċċezzjonali fejn il-kontribut Komunitarju mhux se jaqbeż il-***

(b) 75% tan-nefqa għall-operat ta' korp ***jew ta' netwerk specjalizzata, li mhux governattiva, li ma toperax bi qliegħ, li hi indipendent mill-industrija, mill-kummerċ u min-negożju jew minn interessi oħra li huma konfliġġenti, u għandha membri f'għallinqas nofs l-Istati Membri, fejn l-ghan prinċipali ta' din l-NGO jew netwerk specjalizzata huwa l-promozzjoni tas-sahħha***

95%. It-tiġidid ta' kontribuzzjonijiet finanzjarji bħal dawn jiġi eżentat mill-prinċipju ta' tnaqqis sistematiku.

jew il-prevenzjoni jew il-kura tal-mard fil-Komunità Ewropea, fejn dan l-appoġġ huwa neċċessarju sabiex ir-rappreżentazzjoni ta' l-interessi fuq il-livell Komunitarju jkun żgurat jew biex jiġu implimentati l-ghanijiet pricipali tal-Programm. L-Applikanti għandhom ifornu lill-Kummissjoni akkawnts aġġornati tas-shubija tagħhom, tar-regolamenti interni u tal-għejien ta' l-iffinanzjar tagħhom.

F'każi jiet ta' utilità eċċeżzjonali l-kontribut Komunitarju mhux se jaqbeż il-95%. **Il-kriterji sabiex jiġi determinat jekk hemmx każ ta' utilità eċċeżzjonali għandhom jiġu stabbiliti minn qabel fil-pjan annwali ta' hidma msemmi fl-Artikolu 7(1)(a) u għandhom jiġu ppublikati.** It-tiġidid ta' dawn il-kontribuzzjonijiet finanzjarji **lill-ghaqdiet mhux governattivi u lil netwerks speċjalizzati** jista' jiġi eżentat mill-prinċipju ta' tnaqqis sistematiku.

Bħala regola ġenerali l-Kummissjoni tista' tagħti finanzjament bażiku fuq medda ta' sentejn bl-ghajnuna ta' konvenzjoni ta' netwerk ta' shubija. Bi qbil ma' l-Artikolu 163 tar-Regoli ta' Implementazzjoni tar-Regolamenti Finanzjarji, din is-shubija tistabbilixxi koperazzjoni fit-tul bejn ir-riċevitur u l-Kummissjoni, imma ma għandiex tkun itwal minn sentejn.

Justification

Participation of civil society is vitally important for the formulation and implementation of European health policy. The EU provides core funding so that health interests could be effectively represented at the Community level. The specification of NGOs, which play an important role in promoting health and are able to take part in the programme, will provide greater legal certainty for funding the measures under the programme. Further, establishing in advance the criteria for assessing whether or not exceptional utility applies should also give more legal certainty for funding.

The application of Article 163 of the Implementing Rules of the Financial Regulation will provide the relevant health organisations with more financial certainty and reduce the administrative burden of both the Commission and the European health organisations. Core financing is, contrary to project funding, by nature distributed to organisations which pursue long term objectives. Therefore, the possibility of establishing a long-term co-operation is especially suited to applicants for core funding.

Emenda 54
Artikolu 3, paragrafu 3

3. Ghall-fini tal-paragrafu 1(a) imsemmi hawn fuq, kontribuzzjonijiet finanzjarji mill-Komunità jistgħu, fejn xieraq skond l-ghan li jrid jintlaħaq, jinkludu ffinanzjar konġunt mill-Komunità u minn wieħed jew aktar mill-Istati Membri jew mill-Komunità u minn awtoritajiet kompetenti ta' pajjiżi oħra parteċipanti. F'dan il-każ il-kontribut tal-Komunità mhux se jkun aktar minn 50%, ġilf f'każżejjiet ta' utilità eċċeżżjonali, fejn il-kontribut tal-Komunità ma jkunx aktar minn 70%. Dawn il-kontribuzzjonijiet tal-Komunità jistgħu jingħataw lil korp pubbliku jew lil korp li ma joperax bi qliegħ magħżul mill-Istat Membru jew mill-awtorità kompetenti kkonċernata u mifthema mal-Kummissjoni.

3. Ghall-fini tal-paragrafu 1(a) imsemmi hawn fuq, kontribuzzjonijiet finanzjarji mill-Komunità jistgħu, fejn xieraq skond l-ghan li jrid jintlaħaq, jinkludu ffinanzjar konġunt mill-Komunità u minn wieħed jew aktar mill-Istati Membri jew mill-Komunità u minn awtoritajiet kompetenti ta' pajjiżi oħra parteċipanti. F'dan il-każ il-kontribut tal-Komunità mhux se jkun aktar minn 50%, ġilf f'każżejjiet ta' utilità eċċeżżjonali, fejn il-kontribut tal-Komunità ma jkunx aktar minn 70%. Dawn il-kontribuzzjonijiet tal-Komunità jistgħu jingħataw lil korp pubbliku jew lil korp li ma joperax bi qliegħ magħżul mill-Istat Membru jew mill-awtorità kompetenti kkonċernata u mifthema mal-Kummissjoni. **Dawn il-kontribuzzjonijiet tal-Komunità għandhom jingħataw fuq il-baži tal-kriterji tal-organizzazzonijiet tal-pazjenti u tal-konsumenti adottati mill-Aġenzija Ewropea għall-Mediċini (Settembru 2005).**

Justification

It is in the public interest that these Community contributions to patients' and consumers' organisations can be made available as soon as possible after the adoption of the programme of community action in the field of health (2007-2013). Relevant criteria already exists and have been officially adopted by the European Medicines Agency (EMEA) in September 2005. Where both the European Commission and the EMEA use the same criteria in consistency will be ensured at the EU level.

Amendment 55
Article 4

Il-Kummissjoni għandha tiżgura li ***I-programm*** ikun implementat skond id-dispożizzjonijiet ta' ***I-Artikolu 7***.

1. Il-Kummissjoni, b'koperazzjoni mill-qrib ma' l-Istati Membri, għandha tiżgura l-implementazzjoni ta' *I-azzjonijiet u l-miżuri stabbiliti fil-Programm* skond id-dispożizzjonijiet ta' *I-Artikoli 6 u 7 u tiżgura I-żvilupp koeżiv u bbilanċċejat tiegħu.*

Justification

Cooperation between the Commission and the Member States is a precondition for effective implementation of the programme.

Emenda 56
Artikolu 4, paragrafu 1.a (ġdid)

1a. Sabiex tassisti l-implimentazzjoni, il-Kummissjoni għandha tiżgura l-koordinazzjoni, jekk ikun neċċesarju, l-integrazzjoni tan-networks ghall-immoniterjar ta' saħħa u reazzjoni rapida għal theddid għas-saħħa.

Emenda 57
Artikolu 4, paragrafu 1 b (ġdid)

1b. Il-Kummissjoni u l-Istati Membri għandhom jieħdu azzjoni xierqa, fl-oqsma ta' kompetenza rispettivi tagħhom, biex jiżguraw li l-Programm jopera effettivament, u biex jiżviluppaw mekkaniżmi fuq livell tal-Komunita u ta' l-Istati Membri biex jinkisbu l-objettivi tal-Programm. Għandhom jiżguraw li jipprovd l-informazzjoni xierqa rigward l-azzjonijiet appoġġati mill-Programm u li l-iktar partecipazzjoni wiesgħa possibbli tinkiseb b'azzjonijiet li għandhom bżonn implimentazzjoni minn awtoritajiet lokali u regionali u organizzazzjonijiet mhux governattivi.

Justification

Coordination and cooperation between the Commission and the Member States is absolutely essential for effective implementation of the programme.

Emenda 58
Artikolu 4, subparagraphu 1 c (ġdid)

1c. Il-Kummissjoni għandha tiżgura li l-attivitajiet kollha li għandhom x'jaqsmu mar-rekording, ma' l-ipproċessar u mal-komunikazzjoni tad-dejta, isiru skond l-mod ġenerali tal-'Metodu Miftuh ta' Koordinazzjoni fil-Qasam tas-Sahħa'.

Justification

It should be made clear that avoiding duplication of effort must receive ample attention. In particular, however, it seems important to put in order the terminology relating to the recording, processing and communication of data and to render it semantically unambiguous.

Emenda 59
Artikolu 4, paragrafu 1 d (ġdid)

1d. Il-Kummissjoni b'koperazzjoni mill-qrib ma' l-Istati Membri, għandha tagħmel komparabilità tad-dejta u l-informazzjoni, u tagħmel kompatibilità u interoperabilità tas-sistemi u n-netwerks għal skambju ta' dejta u informazzjoni dwar is-sahħha.

Emenda 60
Artikolu 4, paragrafu 1 e (ġdid)

1e. Il-Kummissjoni b'koperazzjoni mill-qrib ma' l-Istati Membri, sabiex tikseb l-ghanijiet tal-Programm, għandha tiżgura l-komunikazzjoni u l-koperazzjoni neċċesarja maċ-Ċentru Ewropew ghall-Prevenzjoni u ghall-Kontroll tal-Mard, sabiex jintlaħqu l-objettivi tal-Programm.

Justification

Coordination and cooperation between the Commission, the Member States and the ECDC is absolutely necessary for the effective implementation of the objectives of the

programme.

Emenda 61
Artikolu 4, paragrafu 1 f (ġdid)

If. Meta timplimenta l-Programm, il-Kummissjoni, flimkien ma' l-Istati Membri, għandha tiżgura konformità mad-dispożizzjonijiet relevanti legali kollha rigward il-protezzjoni tad-dejta personali u, fejn ikun neċessarju, l-introduzzjoni ta' mekkaniżmi sabiex tiżgura il-konfidenzjalità u s-sikurezza ta' dejta bħal din.

Justification

Collection of relevant data is an essential part of the programme. In order to guarantee its legitimacy and credibility, it must comply with all relevant legal provisions on data protection.

Emenda 62
Artikolu 4, paragrafu 1 g (ġdid)

Ig. Il-Kummissjoni b'koperazzjoni mill-qrib ma' l-Istati Membri, għandha tiżgura t-tranżizzjoni bejn dawk l-azzjonijiet li żviluppaw fi ħdan l-ewwel programm adottati mid-Deciżjoni msemmija fl-Artikolu 11 li jikkontribwixxi ghall-prioritajiet stipulati f'dan il-programm, u bejn dawk l-azzjonijiet li jridu jiġu implementati skond dan il-programm.

Emenda 63
Artikolu 4 a (ġdid)

Artikolu 4a
Strateġiji u azzjonijiet konġunti

1. Sabiex ikun žgurat livell għoli ta' protezzjoni tas-saħħha fid-definizzjoni u l-

implementazzjoni tal-politiki u attivitajiet Komunitarji kollha u sabiex jiġi promoss it-taqsim ewlieni tas-saħħha, l-objettivi tal-Programm jistgħu jiġu implementati bhala strategiji konġunti u azzjonijiet konġunti billi jinholqu rabtiet mal-programmi, ma' l-azzjonijiet u mal-fondi Komunitarji relevanti.

2. Il-Kummissjoni għandha tiżgura li l-Programm jinrabat sewwa ma' programmi, ma' azzjonijiet u ma' fondi Komunitarji ohra. B'mod partikulari, koperazzjoni mas-Seba' Programm ta' Qafas ta' Riċerka għandha ssahħħah l-impatt tal-programm tas-saħħha.

Justification

It is necessary to develop joint strategies and actions by promoting Community synergy and maximising the impact of the programme on other Community measures, actions and funds.

Emenda 64

Artikolu 5, paragrafu 1

1. Il-qafas finanzjarju għall-implementazzjoni **tal-programm** għall-perjodu spċifikat fl-Artikolu 1 huwa ta' **1203 miljun EUR**.

1. Il-qafas finanzjarju *indikattiv* għall-implementazzjoni **tal-Programm** huwa ta' **EUR 1 500 miljun għall-perjodu ta' seba' snin li jibda mill-ewwel ta' Jannar 2007.**

Justification

The budget for the programme should be increased to cover the addition of new actions and measures and to ensure its integrated and effective implementation. The amendment emphasizes that the amount proposed is subject to confirmation by a possible multiannual financial framework.

Emenda 65

Artikolu 5, paragrafu 2 a (ġidid)

2a. Il-Kummissjoni għandha tiżgura li d-dispożizzjonijiet finanzjarji għall-iffinanzjar tal-Programm ikunu konformi mad-dispożizzjonijiet tar-Regolament Finanzjarju applikabbi għall-baġit

ġenerali tal-Komunitajiet Ewropej.

Justification

Any derogation within the basic act should be in line with the provisions the Financial Regulation.

Emenda 66
Artikolu 7, paragrafu 1, punt (a)

(a) il-pjan ta' hidma annwali għall-implimentazzjoni ***tal-programm***, li jistipula l-prioritajiet u l-azzjonijiet li għandhom jitwettqu, inkluža l-allokazzjoni ta' riżorsi ***u kriterji rilevanti***;

(a) il-pjan ta' hidma annwali għall-implimentazzjoni ***tal-Programm***, li jistipula l-prioritajiet u l-azzjonijiet li għandhom jitwettqu, inkluža l-allokazzjoni ta' riżorsi;

Justification

This amendment together with subsequent amendments aims to make the provisions on implementation clearer and more precise.

Emenda 67
Artikolu 7, paragrafu 1, punt (a a) (ġidid)

(aa) l-arrangamenti, kriterji, mizuri ta' trasparenza u proceduri ta' l-għażla u ta' l-issfinanzjar ta' l-azzjonijiet tal-Programm;

Justification

These matters call, in procedural terms, for the adoption of implementing measures by the management committee.

Emenda 68
Artikolu 1, paragrafu 1, punt (a b) (ġidid)

(ab) l-arrangamenti għall-koordinazzjoni, għat-trasmissjoni, għall-iskambju u għat-tixrid ta' informazzjoni u propjetà intelletwali u ż-żamma tad-dejta li għandha x'taqsam ma' azzjonijiet u mizuri msemmija fl-Anness.

Justification

These matters call, in procedural terms, for the adoption of implementing measures by the management committee.

Emenda 69
Artikolu 7, paragrafu 2

2. Il-Kummissjoni tadotta kull miżura oħra meħtieġa għat-twettiq ta' din id-Deciżjoni.

Il-Kummissjoni għandha tigi mgħarrfa bihom.

2. Il-Kummissjoni għandha tadotta kull miżura oħra meħtieġa għat-twettiq ta' din id-Deciżjoni ***skond il-proċedura konsultattiva li hemm referenza għaliha fl-Artikolu 6(3).***

Justification

Provides greater clarity.

Emenda 70
Artikolu 9

Matul l-implementazzjoni ***tal-programm***, relazzjonijiet ma' pajjiżi terzi li mhumiex jieħdu sehem ***fil-programm*** u organizzazzjonijiet internazzjonali rilevanti sejkun mħegħġa.

Matul l-implementazzjoni ***tal-Programm***, relazzjonijiet ma' pajjiżi terzi li mhumiex jieħdu sehem ***fil-Programm*** u organizzazzjonijiet internazzjonali rilevanti, ***b'mod partikulari l-WHO***, għandhom ikunu mħegħġa.

Justification

The World Health Organisation should be specifically named here, as it is the most important international organisation in the field of health.

Emenda 71
Artikolu 10, paragrafu 2

2. ***Fuq it-talba tal-Kummissjoni, l-Istati Membri jibagħtu informazzjoni dwar l-implementazzjoni u l-impatt ta' dan il-programm.***

2. ***Il-Kummissjoni għandha tippreżenta lill-Parlament Ewropew, lill-Kunsill, lill-Kunitat Ekonomiku u Soċjali Ewropew u lill-Kunitat tar-Reġjuni:***

(a) rapport interim ta' evalwazzjoni estern u indipendenti dwar ir-riżultati miksuba u dwar l-aspetti kwalitattivi u kwantitattivi ta' l-implementazzjoni tal-Programm sa mhux iżjed tard minn tliet snin wara li dan jiġi adottat; ir-rapport, b'mod partikulari, għandu jagħmilha possibli li

jiġi assessjat l-impatt tal-miżuri fuq il-pajjiżi kollha; ir-rapport għandu jkollu fih ġabra fil-qosor tal-konkluzjonijiet prinċipali u rimarki mill-Kummissjoni;

(b) Komunikazzjoni fuq it-tkomplija tal-Programm mhux aktar tard minn erba' snin wara li dan jiġi adottat;

(c) mhux aktar tard mill-31 ta' Diċembru 2015, rapport dettaljat estern u indipendent i ta' evalwazzjoni retroattiva li jkopri l-implementazzjoni u r-riżutati tal-Programm, għandu jitfassal mat-tmiem ta' l-implementazzjoni tiegħu.

Justification

An independent evaluation of the results of the programme is considered essential.

Emenda 72

Artikolu 10, paragrafu 3

**3. Il-Kummissjoni se tiżgura li l-programm jiġi evalwat tliet snin wara l-bidu tiegħu u wara tmiem il-programm.
Il-Kummissjoni tikkomunika l-konkluzjonijiet tiegħu, flimkien mal-kummenti tagħha, lill-Parlament Ewropew, lill-Kunsill, lill-Kumitat Ekonomiku u Soċjal u lill-Kumitat tar-Regjuni.**

Justification

The contents of this paragraph are incorporated in a clearer and more precise form in amendment to Article 10, paragraph 2.

Emenda 73

Artikolu 10, paragrafu 3 a (ġdid)

3a. Il-Kummissjoni għandha tippubblika kull sentejn minn wara l-adozzjoni tal-Programm, rapport dwar l-Istatus tas-Saħħa fl-Unjoni Ewropea bbażat fuq id-dejta u l-indikaturi kollha u jkun jinkludi analiżi kwalitattiva u kwantitattiva.

Justification

A periodical report should be published on health in the Union based on data and indicators derived from implementation of the measures under the programme.

Emenda 74
Artikolu 11

Id-Deciżjonijiet Nru 1786/2002/KE u Nru 20/2004/KE gew revokati. ***Id-Deciżjoni Nru 1786/2002/KE għiet revokata.***

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection Programme.

Emenda 75
Artikolu 12

Il-Kummissjoni se tadotta kull miżura meħtieġa sabiex tīgi żgurata tranzizzjoni bejn il-miżuri adottati taħt *id-Deciżjonijiet 1786/2002/KE u 20/2004/KE* u dawk li għandhom jiġu implementati taħt dan il-programm.

Il-Kummissjoni għandha tadotta kull miżura meħtieġa sabiex tīgi żgurata tranzizzjoni bejn il-miżuri adottati taħt *id-Deciżjoni 1786/2002/KE* u dawk li għandhom jiġu implementati skond dan il-Programm.

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. The deleted parts are covered by the report on the Consumer Protection programme.

Emenda 76
Anness 1

Dan l-anness tkassar.

Justification

All the elements relevant to the Health Programme should be included in Annex 2, so that the programme would contain only one single Annex.

Emenda 77
Anness 2, titolu

ANNESS 2 - **SAHHA**

ANNESS

Justification

As Annex 1 is merged with Annex 2 and Annex 3 covers the Consumer Protection programme, there will only be one annex in the Public Health Programme.

Emenda 78
Anness 2, l-ewwel objettiv, punt 1

**1. TITJIB TAS-SORVELJANZA U KONTROLL
TAT-THEDDID GHAS-SAHHA PERMEZZ TA'**

**1.1. TITJIB TAS-SORVELJANZA U KONTROLL
TAT-THEDDID GHAS-SAHHA PERMEZZ TA'**

—

(In-numerar tal-punti sekondarji għandu jitraqa kif suppost, jigifieri 1.1.1, 1.1.2, ecc.)

Justification

Change of numbering.

Emenda 79
Anness 2, l-ewwel objettiv, punt 1, punt sekondarju 1.1.

1.1. Titjib tal-kapaċitā li jiġi indirizzat il-mard li jittieħed billi tīgi appoggata aktar l-implementazzjoni tad-Deciżjoni 2119/98/KE dwar in-network tal-Komunità għas-sorveljanza epidemjologika u l-kontroll tal-mard li jittieħed;

1.1. Titjib tal-kapaċitā li jiġi indirizzat il-mard li jittieħed billi tīgi appoggata l-implementazzjoni aħjar tad-Deciżjoni 2119/98/KE dwar in-netwerk tal-Komunità għas-sorveljanza epidemjologika u l-kontroll tal-mard li jittieħed, ***filwaqt li jkunu kkunsidrati l-attivitàjet tac-Čentru Ewropew għall-Prevenzjoni u ghall-Kontroll tal-Mard;***

Justification

It is important that the role already performed by the European Centre for Disease Prevention and Control is not duplicated through the implementation of this programme.

Emenda 80

Anness 2, l-ewwel objettiv, punt 1, punt sekondarju 1.3.

1.3. L-iskambju ta' tagħrif dwar strategiji u l-iżvilupp ta' strategiji kongunti għas-sejba u l-kisba ta' tagħrif sod dwar riskji għas-saħħha minn sorsi fizċi, kimiċi jew bijoloġiči, inkluži dawk marbuta ma' atti ta' tixrid *malizzjuż*, u l-iżvilupp u l-użu, fejn jixraq, ta' strategiji u mekkaniżmi Komunitarji;

1.3. L-iskambju ta' tagħrif dwar strategiji u l-iżvilupp ta' strategiji kongunti għas-sejba u l-kisba ta' tagħrif sod dwar riskji għas-saħħha minn sorsi fizċi, kimiċi jew bijoloġiči, inkluži dawk marbuta ma' atti ta' tixrid *apposta*, u l-iżvilupp u l-użu, fejn jixraq, ta' strategiji u mekkaniżmi Komunitarji
b'koordinazzjoni maċ-Ċentru Ewropew ghall-Prevenzjoni u ghall-Kontroll tal-Mard;

Emenda 81

Anness 2, l-ewwel objettiv, punt 1, punt sekondarju 1.5.a (ġidid)

1.5.a Immoniterjar tar-reżistenza ta' batterji għal antibijotici u ta' infekzjonijiet li jittieħdu waqt rikoveru fi sptar (nosocomial infections), u l-holqien ta' strategiji ghall-prevenzjoni u l-kura tagħhom.

Justification

The increase in resistance to antibiotics and the increase in nosocomial infections are of particular concern at the present time. There is, therefore, a need to collect data, to monitor and to develop strategies to treat them.

Emenda 82

Anness 2, l-ewwel objettiv, punt 1, punt sekondarju 1.6.a (ġidid)

1.6.a Holqien ta' mizuri ghall-prevenzjoni ta' mard u korrimenti f'individwi li jkunu soċjalment iżolati u sabiex titqajjem kuxjenza fl-immigranti fejn jidħlu kwistjonijiet ta' saħħha.

Emenda 83
Anness 2, l-ewwel objettiv, punt 1, punt sekondarju 1.6.b (ġdid)

1.6.b Iheġġegħ lill-Istati Membri sabiex jistabbilixxu bords għall-iskrutinju tal-medīċini li jkunu verament indipendent sabiex jimmoniterjaw l-užu u l-effetti tal-medīċini godda kollha li jeħtiegu riċetta tat-tabib, mid-data li jkunu approvati.

Justification

Self-explanatory. Stress should be placed on the need for such boards to be genuinely independent and free from influence by pharmaceuticals companies.

Emenda 84
Anness 2, l-ewwel objettiv, punt 2

**2. TWASSIL TA' REAZZJONI GHAT-THEDDID
GHAS-SAHHA PERMEZZ TA'**

1.2. TWASSIL TA' REAZZJONI GHAT-THEDDID GHAS-SAHHA PERMEZZ TA'

(In-numerar tal-punti sekondarji għandu jitranġa kif suppost, jiġifieri 1.2.1, 1.2.2, ecc.)

Justification

Change of numbering.

Emenda 85
Anness 2, l-ewwel objettiv, punt 2, punt sekondarju 2.1.

2.1. L-elaborazzjoni ta' proċeduri għal ġestjoni tar-riskji għall-emerġenzi tas-saħħha u t-titjib tal-kapaċità għal reazzjonijiet ikkoordinati għall-emerġenzi tas-saħħha;

2.1. L-elaborazzjoni ta' proċeduri ta' ġestjoni tar-riskji għall-emerġenzi tas-saħħha, *inkluż proċeduri għall-assistenza reciproka fil-kaz ta' pandemiji*, u t-titjib tal-kapaċità għal reazzjonijiet ikkoordinati għall-emerġenzi tas-saħħha;

Justification

Flu pandemics and the growing threat of other diseases exposes the gap between the richer and poorer countries in the Union. Some can cope with the challenge posed by diseases, while others cannot. It is therefore proposed that provision be made for procedures and assistance in such cases.

Emenda 86
Anness 2, l-tieni objettiv, punt 3

**3. IL-PROMOZZJONI TAS-SAHHA BILLI JIĞU
TRATTATI L-FATTURI DETERMINANTI**

**2. IL-PROMOZZJONI TAS-SAHHA BILLI JIĞU
INDIRIZZATI L-FATTURI DETERMINANTI**

*(In-numerar tal-punti sekondarji għandu
jitrangha kif suppost, jiġifieri 2.1, 2.2, eċċ.)*

Justification

Change of numbering.

Emenda 87
Anness 2, Objettiv 2, punt 3, subpunkt 3.1.

3.1. Il-fatturi determinanti tas-saħħa li huma marbuta mal-vizzji, notevolment it-tabakk, l-alkohol **u** d-drogi u sustanzi vizzjuži oħra;

3.1. Il-fatturi determinanti tas-saħħa li huma marbuta mal-vizzji, notevolment it-tabakk, l-alkohol, **drogi bħala medicina bi preskrizzjoni**, id-drogi **illegali** u sustanzi vizzjuži oħra;

Justification

Decision No 1786/2002/EC adopting a programme of Community action in the field of public health (2003- 2008) includes drug prevention under the health determinants strand of the public health programme. It is important to acknowledge here the problem of drugs- related health damage caused by addiction to (legal) prescription drugs by identifying the latter as health determinants. The consequences for individuals can be akin to those created by heroin and alcohol addiction.

Emenda 88
Anness 2, Objettiv 2, punt 3, subpunkt 3.1. a (ġdid)

3.1.a Prattiċi li jwasslu għal stil ta' hajja aktar b'saħħtu, biex itejbu s-saħħha tat-tfal;

Emenda 89
Anness 2, Objettiv 2, punt 3, subpunt 3.2.

3.2. Il-fatturi determinanti tas-sahħha li huma marbuta ma' l-istil tal-ħajja, *notevolment* innutriment u l-attività fizika, is-sahħha sesswali u s-sahħha riproduttiva;

3.2. Il-fatturi determinanti tas-sahħha li huma marbuta ma' l-istil tal-ħajja, *b'mod partikulari* n-nutriment u l-attività fizika, is-sahħha sesswali u s-sahħha riproduttiva **u s-sahħha mentali**;

Justification

Lifestyle determinants are having an increasing impact on mental health, for example occupational stress and depression.

Emenda 90
Anness 2, Objettiv 2, punt 3, subpunt 3.2. a (ġdid)

3.2.a Fatturi relatati ma' korriġment determinanti għas-sahħha;

Justification

The identification of injury-related determinants could improve their prevention and medical care.

Emenda 91
Anness 2, Objettiv 2, punt 3, subpunt 3.3.

3.3. Il-fatturi determinanti tas-sahħha li huma ta' natura soċjali u ekonomika, b'konċentrazzjoni partikolari fuq l-inugwaljanzi fis-sahħha **u** fuq l-impatt ta' fatturi soċjali u ekonomici fuq is-sahħha;

3.3. Il-fatturi determinanti tas-sahħha li huma ta' natura soċjali u ekonomika, b'konċentrazzjoni partikolari fuq l-inugwaljanzi fis-sahħha, fuq l-impatt ta' fatturi soċjali u ekonomici fuq is-sahħha **u firrigward ta' diskriminazzjoni kontra gruppi vulnerabili**;

Justification

It is essential to include measures to reduce discrimination against vulnerable groups in matters of health, such as the disabled.

Emenda 92
Anness 2, Objettiv 2, punt 3, subpunt 3.3. a (ġdid)

3.3.a Identifikazzjoni tal-kawżi ta' inegwaljanzi tas-sahħha, li għandhom impatt fil-prevenzjoni u f'kura tas-sahħha mill-aqwa, b'attenzjoni partikulari ghall-inugwaljanzi tas-sahħha fl-Istati Membri l-ġodda.

Justification

There are currently major differences between the Member States and within them in terms of average lifespan of citizens, their state of health and their access to care. This is particularly true for the new Member States. Consequently, it is essential that the programme takes measures to reduce them and involve the new Member States.

Emenda 93
Anness 2, Objettiv 2, punt 3, subpunt 3.4.

3.4. Il-fatturi determinanti tas-saħħha li huma ta' natura ambjentali, b'enfaži partikolari fuq l-impatt ta' fatturi ambjentali fuq is-sahħha;

3.4. Il-fatturi determinanti tas-saħħha li huma ta' natura ambjentali, b'enfaži partikolari fuq l-impatt ta' fatturi ambjentali fuq is-sahħha, *inkluži l-kwalità ta' l-arja ġewwa l-bini u l-espozizzjoni għal kimiċi tossiċi, bħal sustanzi li jinbidlu, karċinoġeni, allergeniċi, u reprotoċċi;*

Emenda 94
Anness 2, Objettiv 2, punt 3, subpunt 3.4. a (ġdid)

3.4.a Analizi ta' fatturi determinanti ġenetiċi u ta' fatturi personali u bijologiċi ta' mard serju u ta' žvilupp ta' strateġiji ta' prevenzjoni, inkluž l-iskrinjar ġenetiku;

Justification

These issues were specifically listed in the legal text of the current Public Health Programme but are missing in the text of the new Health Programme.

Emenda 95

Anness 2, Objetiv 2, punt 3, subpunt 3.5.a (ġdid)

3.5.a L-iżvilupp ta' strategiji u l-iskambju ta' prattici korretti biex sakemm ikun possibbli tkun evitata d-disabilità u jippromwovu s-sahħha ta' persuni b'disabilità;

Gustifikazzjoni

It is essential to include measures to develop strategies and exchange correct practices to prevent disability, where feasible, and to promote the health of people with disabilities.

Emenda 96

Anness 2, Objetiv 2, punt 3, subpunt 3.5. b (ġdid)

3.5.b Appoġġ għall-iżvilupp ta' taqsimiet ta' l-edukazzjoni dwar in-nutrizzjoni għal ġenituri u ghall-ulied, b'azzjonijiet li jilhqu wkoll strati remoti mill-edukazzjoni.

Justification

Overweight and obesity among children, who are likely to carry the condition on into adulthood, due to wrong diets, is a growing problem in Europe. Targeted measures, which are also perceived by strata remote from education, should tackle the problem.

Emenda 97

Anness 2, Objetiv 2, punt 3, subpunt 3.5. c (ġdid)

3.5.c Appoġġ għall-istrategiji ta' promozzjoni tas-sahħha fin-neozjni;

Justification

'Health promotion building blocks' should be made available to businesses which they can use to provide health education for their employees and to protect their health.

Emenda 98
Anness 2, Objettiv 2, punt 3, subpunt 3.5. d (ġdid)

3.5.d Appoġġ għall-azzjonijiet li jtejbu d-dijanjosi u t-terapija għal persuni avanzati fl-età;

Justification

The field of geriatric medicine should receive support in the EU Member States. Diagnosis and therapy for older persons suffering from so-called diseases of old age require separate attention and separate methods.

Emenda 99
Anness 2, Objettiv 2, punt 3, subpunt 3.5.e (ġdid)

3.5.e Aspetti ta' saħħa fl-età u fis-sessi.

Justification

Gender aspects of health are not acknowledged despite recent work to highlight the gender differences and inequalities in health of both women and men. Ageing appears in the introduction of the proposal but is absent in the draft legal text.

Emenda 100
Anness 2, Objettiv 3

It-tielet għan: li jingħata kontribut għat-tnaqqis ta' l-okkorrenza tal-mard ewljeni

It-tielet objettiv: li jingħata kontribut għat-tnaqqis ta' l-okkorrenza, **tal-morbożità u tal-mortalità** tal-mard u **tal-korriement** ewljeni

Justification

Amendment for consistency with amendment of part of Article 2 concerning the objectives of the programme.

Emenda 101
Anness 2, Objettiv 3, punt 4

4. IL-PREVENZJONI TAL-MARD U TAL-

3. IL-PREVENZJONI TAL-MARD U TAL-

KORRIMENTI

KORRIMENTI

(*L-innumerar tas-subpunti għandu jinbidel kif jixraq, i.e. 3.1., 3.2., ecc.*)

Justification

Change of numbering.

Emenda 102
Anness 2, Objettiv 3, fraži introduttora

B'koordinazzjoni mal-ħidma fuq il-fatturi *li jiddeterminaw is-sahħha, il-programm jappoġġja:*

B'koordinazzjoni mal-ħidma fuq il-fatturi *determinanti, il-Programm għandu jappoġġja:*

Justification

Provides greater clarity.

Emenda 103
Anness 2, Objettiv 3, punt 4, subpunkt 4.1.

4.1. L-iżvilupp u l-implementazzjoni ta' azzjonijiet fuq il-mard ewljeni ta' importanza *partikolari minħabba il-piż kumplessiv tal-mard fil-Komunità fejn azzjoni Komunitarja tista' tipprovd valur miżjud sinifikanti lill-isforzi nazzjonali;*

4.1. L-iżvilupp u l-implementazzjoni ta' azzjonijiet fuq il-mard ewljeni ta' importanza *partikulari minħabba l-piż kumplessiv tal-mard u tal-kawżi prinċipali tat-telf ta' snin ta' hajja potenzjali u ta' l-inkapacitajiet fil-Komunità fejn azzjoni Komunitarja tista' tipprovd valur miżjud sinifikanti lill-isforzi nazzjonali;*

Justification

The emphasis is placed on the diseases themselves but also on their causes.

Emenda 104
Anness 2, Objettiv 3, punt 4, subpunt 4.2.

4.2. It-thejjija u l-implimentazzjoni ta' strategiji u miżuri fuq il-prevenzjoni tal-mard, partikolarment permezz ta' l-identifikazzjoni ta' l-ahjar prassi u l-iżvilupp ta' linji gwida u rakkmandazzjonijiet, inkluži fuq prevenzjoni sekondarja, *skrining* u s-sejba minn kmieni;

4.2. It-thejjija u l-implimentazzjoni ta' strategiji u miżuri fuq il-prevenzjoni tal-mard u ***tar-rijabilitazzjoni***, partikolarment ***fil-kaž ta' mard prinċipali*** permezz:

- ***ta' l-iffukar fuq il-prevenzjoni primordjali*** (*biex tevita l-iżvilupp ta' riskju ta' mard fil-ġenerazzjonijiet li jmiss*),
- ***ta' l-iżvilupp ta' prevenzjoni primarja f'adulti li ma jurux sintomi inkluži l-prevenzjoni tal-massa u l-istrategiji b'riskju għoli***,
- ta' l-identifikazzjoni ta' l-ahjar prassi u l-iżvilupp ta' linji gwida u rakkmandazzjonijiet (*b'enfasi partikulari fuq strateġiji mmirati biex iqarrbu l-linjigwida, ir-rakkmandazzjonijiet, u l-prattika attwali*), inkluži fuq prevenzjoni sekondarja, *l-iskrinjar* u s-sejba minn kmieni,
- ***ta' l-ippromowtjar u l-iżvilupp ta' ghodod ta' assessjar tar-riskju, u***
- ***ta' l-indirizz ta' differenzi fis-sess u tal-popolazzjoni li tixxieħ.***

Justification

Prevention is to be addressed globally, i.e. early and late in life, in the male and female population not at risk as well as in the population having suffered from disease in the past. This can be done simply by giving primary care professionals and general practitioners access to risk-assessment tools. A special focus on the medical profession education is needed.

Emenda 105
Anness 2, Objettiv 3, punt 4, subpunt 4.2, subparagraphu 1 a (ġdid)

Il-Kummissjoni se tippreżenta, kif jixraq, u matul iż-żmien ta' dan il-Programm ta' Qafas, proposti għal Rakkmandazzjonijiet tal-Kunsill dwar il-prevenzjoni, id-dianjosi u l-kontroll ta' mard serju.

Justification

The transferring of best practice across Europe for major diseases will undoubtedly add value to national health strategies. EU actions are also justified in terms of efficiency as well as addressing inequalities between Member States by reducing inconsistency in national policies. The diseases have already, to varying degrees, attracted EU attention but incoherently it follows that Europe should contribute now to prevention, diagnosis and control in these areas.

Emenda 106

Anness 2, Objettiv 3, punt 4, subpunt 4.2.a (ġdid)

4.2.a Preparazzjoni ta' strategiji u ta' mizuri dwar tilqim u rakkomandazzjonijiet ghall-implementazzjoni tagħhom.

Emenda 107

Anness 2, Objettiv 3, punt 4, subpunt 4.3.a (ġdid)

4.3.a Żvilupp ta' strategiji u ta' mizuri biex jindirizzaw u jirretifikaw il-kawżi ta' l-inugwaljanzi fis-sahħha;

Justification

Self-explanatory as a reduction in inequalities is one of the priorities of the programme.

Emenda 108

Anness 2, Objettiv 3, punt 4, subpunt 4.3.b (ġdid)

4.3.b Promozzjoni ta' l-aqwa prattika għal mard u għal korrimenti bhala prevenzjoni għal aktar deterjorament fis-sahħha;

Justification

Self-explanatory as a reduction in inequalities is one of the priorities of the programme.

Emenda 109
Anness 2, Objettiv 3, punt 4, subpunt 4.3.c (ġdid)

4.3.c Promozzjoni tat-telemedicina bil-ħsieb ta' networking tas-servizzi tas-sahħha, ta' l-iffaċilitar tal-mobilità tal-pazjent u tal-provvediment tal-kura fid-dar, b'mod partikulari ghall-anzjani, ghall-handikappati jew ghall-individwi li jghixu waħedhom;

Justification

Telemedicine applications promote patients' mobility, facilitating their prompt and appropriate access to health services. At the same time, providing care at home, also by way of telemedicine, to elderly, disabled or isolated individuals helps to reduce the impact of disease and injury, and rationalise expenditure in the health sector.

Emenda 110
Anness 2, Objettiv 3, punt 4, subpunt 4.4.

4.4. It-thejjija u l-implimentazzjoni ta' strategiji u miżuri marbuta mal-prevenzjoni tal-korrimenti;

4.4. It-thejjija u l-implimentazzjoni ta' strategiji u miżuri marbuta mal-prevenzjoni tal-korrimenti, **ibbażati fuq fatturi li jiddeterminaw il-korrimient;**

Justification

Action must be based on injury determinants identified by the analysis of injury data.

Emenda 111
Anness 2, Objettiv 3, punt 4, subpunt 4.4.a (ġdid)

4.4.a Żvilupp ta' l-aqwa praktika u ta' linjiegwida dwar korrimenti bbażati fuq l-analizi ta' dejta miġbura;

Justification

Development of best practice and guidelines is the best option for preventive measures and medical care of injuries.

Emenda 112
Anness 2, Objettiv 3, punt 4, subpunt 4.5.a (ġdid)

4.5.a Identifikazzjoni ta' nuqqasijiet fit-tagħrif fil-ġlied kontra mard serju u l-provvediment ta' incenċivi għar-riċerka fil-programmi ta' riċerka ta' l-UE.

Justification

The EU should also join forces to identify knowledge gaps and there should be a link to FP7 programme. A more pro-active research policy and public expenditure may reduce the treatment gaps that still exists in diseases areas that are not profitable for the pharmaceutical industry to develop.

Emenda 113
Anness 2, Objettiv 4, punt 5

5. JINKISBU SINERĢIJI BEJN SISTEMI NAZZJONALI TAS-SAHHA PERMEZZ TA'

—

4. JINKISBU SINERĢIJI BEJN SISTEMI NAZZJONALI TAS-SAHHA PERMEZZ TA'

(L-innumerar tas-subpunti għandu jinbidel kif jixraq, i.e. 4.1., 4.2., ecc.)

Justification

Change of numbering.

Emenda 114
Anness 2, Objettiv 4, punt 5, subpunt 5.1.

5.1. *Il-facilitazzjoni tax-xiri u l-provvista tas-servizzi tal-kura tas-sahha minn pajjiż ghall-ieħor, inkluż il-ġbir u l-iskambju ta' informazzjoni u sabiex il-kapaċità u l-užu ta' kura jkunu jistgħu jinqasmu bejn entitajiet differenti u bejn pajjiż u ieħor;*

5.1. *L-iffacilitar tax-xiri u l-provvista tas-servizzi tal-kura tas-sahha transkonfinali, permezz tal-koperazzjoni bejn l-Istati Membri biex itejbu l-kumplimentarità tas-servizz tas-sahha tagħhom f'zoni transkonfinali u fil-mobilità tal-pazjent, inkluż inter alia :*

- il-ġbir u l-iskambju ta' informazzjoni jippermettu l-iskambju tal-kapaċità u l-užu ta' kura transkonfinali specjalment fil-każ ta' mard rari jew rari b'mod estrem;

- l-informazzjoni dwar il-fornituri u servizzi tal-kura tas-sahha disponibbli f'pajjiż ieħor kif ukoll regoli fir-rigward tar-imbors ta' l-ispejjeż tal-kura tas-sahha;

- l-informazzjoni dwar it-trattamenti li m'humiex disponibbli fl-Istat Membru ta' l-origini tal-pazjent u fir-rigward ta' l-aċċess għal trattamenti li, minkejja li huma

urgenti, ma jistgħux ikunu pprovduti b'mod immedja fl-Istat Membru ta'l-origini tal-pazjent;

Emenda 115

Anness 2, Objettiv 4, punt 5, subpunt 5.2.

5.2. *Il-qsim ta' informazzjoni dwar u l-ġestjoni tal-konsegwenzi tal-mobilità ta' professjonisti fil-qasam tas-saħħa;*

5.2. *Il-ġbir tad-dejta u l-iskambju ta' informazzjoni dwar u l-immaniġġjar tal-konsegwenzi tal-mobilità ta' professjonisti fil-qasam tas-saħħha u l-ippromowtjar ta' politiki dwar il-mobilità tal-pazjent ;*

Emenda 116

Anness 2, Objettiv 4, punt 5, subpunt 5.3.

5.3. L-istabbiliment ta' sistema Komunitarja għall-kooperazzjoni dwar centri ta' referenza u strutturi kollaborattivi oħra bejn sistemi tas-saħħha ta' aktar minn Stat Membru wieħed;

5.3. L-istabbiliment ta' sistema Komunitarja għall-koperazzjoni dwar centri ta' referenza u strutturi kollaborattivi oħra bejn sistemi tas-saħħha ta' aktar minn Stat Membru wieħed *li jippermettu lit-tobba u persuni oħra li jeżerċitaw il-professjoni tal-kura tas-saħħha biex japplikaw l-aqwa prattiki u l-aqwa tagħrif dwar il-prevenzjoni u t-trattament disponibbli fl-UE;*

Justification

Establishment of European centres of reference for each important diseases area (for instance, cardio-vascular, diabetes, lung diseases, mental health, ...) can spread knowledge and best practices both for prevention and treatment throughout the Union. These centres may also contribute to inform citizens/patients on diseases, thus creating more awareness on the possibilities of prevention.

Emenda 117

Anness 2, Objettiv 4, punt 5, subpunt 5.3. a (ġidid)

5.3.a L-użu ta' dejta standardizzata u

indikaturi komuni mill-istituzzjonijiet ta' l-UE biex ikejlu l-inugwaljanzi tas-sessi fis-servizzi tas-sahha u dawk medici fl-UE;

Justification

Gathering knowledge and building up health systems which are specifically geared to the needs of those groups which suffer greatest disadvantage and discrimination help to generate standardised data, although it is essential to apply the subsidiarity principle strictly and take account of the specific characteristics of the health systems of the Member States.

Emenda 118
Anness 2, Objettiv 4, punt 5, subpunt 5.5.

5.5. Il-provvista ta' informazzjoni għall-pazjenti, profesjonisti u persuni li jfasslu l-politika, fuq is-sistemi tas-sahha u l-kura medika bi rbit ma' l-azzjonijiet kumplessivi ta' informazzjoni dwar is-sahha u inkluži mekkaniżmi għall-qsim u t-tixrid ta' informazzjoni bil-pjan ta' azzjoni għal żona Ewropea ta' *Sahha-e*;

5.5. Il-provvista ta' informazzjoni għall-pazjenti, profesjonisti u persuni li jfasslu l-politika, fuq is-sistemi tas-sahha u l-kura medika bi rbit ma' l-azzjonijiet kumplessivi ta' informazzjoni dwar is-sahha u inkluži mekkaniżmi għall-*iskambju* u t-tixrid ta' informazzjoni bil-pjan ta' azzjoni għal żona Ewropea ta' *e-health, filwaqt li tistabbilixxi kriterji ta' kwalità stretti fil-każ tal-websajts relatati mas-sahha;*

Justification

The internet can play an important role in offering medical information. However, public funding should only go to e-health information that is subject to strict quality criteria.

Emenda 119
Anness 2, Objettiv 4, punt 5, subpunt 5.6.

5.6. L-iżvilupp ta' strumenti għall-evalwazzjoni ta' l-impatt tal-politika Komunitarja fir-rigward tas-sistemi tas-sahha;

5.6. L-iżvilupp ta' strumenti għall-evalwazzjoni ta' l-impatt tal-politiki Komunitarji fir-rigward tas-sistemi tas-sahha, *inkluži l-konsegwenzi tat-tkabbir u l-istrategija ta' Lisbona;*

Justification

Enlargement as well as the Lisbon strategy are likely to have very significant impact on health systems and should therefore be mentioned specifically.

Emenda 120
Anness 2, Objettiv 4, punt 5, subpunt 5.7.a (ġidid)

5.7.a L-ippromowtjar tad-disponibilità u ta' l-acċessibilità fil-Komunità ta' organi u ta' sustanzi ta' origini umana ta' kwalità u ta' sikurezza għall-użu mediku.

Justification

Paragraph 6.4 of the original Annex 1 is better placed after Objective 4.

Emenda 121
Anness 2, Objettiv 5 (ġidid)

Objettiv 5: Sabiex itejjeb l-informazzjoni u t-tagħrif dwar is-sahha għall-iżvilupp tas-sahha pubblika u biex jikkontribbwixxi għal integrazzjoni ta' l-objettivi tas-sahha

Justification

A new objective following the reformulation of Article 2.

Emenda 122
Anness 2, Objettiv 5, parti introduttora

Azzjonijiet li jikkontribbwixxu għall-objettivi kollha msemmija hawn fuq:

Azzjonijiet **u strumenti** li jikkontribbwixxu għall-objettivi kollha msemmija hawn fuq:

Justification

Provides greater clarity and is in keeping with the amended text of the Annex.

Emenda 123
Anness 2, Objettiv 5, subtitolu 1 (ġidid) wara l-parti introduttora

GBIR TA' DEJTA, IMMONITORJAR U INFORMAZZJONI DWAR IS-SAHHA

Emenda 124
Anness 2, Objettiv 5, punt 6

6. BIEX ITEJJEB L-INFORMAZZJONI U T-TAGHRIF DWAR IS-SAHHA GHALL-IŻVILU PP TAS-SAHHA PUBBLIKA BIL-:

5.1. ČBIR TA' DEJTA, IMMONITORJAR TAS-SAHHA U FRIX TA' INFORMAZZJONI
(*L-innumerar tas-subpunti għandu jinbidel kif jixraq, i.e. 5.1.1., 5.1.2, 5.1.3, ecc.*)

Justification

Change of numbering.

Emenda 125
Anness 2, punt 6, subpunkt 6.1.a (ġidid)

6.1.a *Żieda fit-tagħrif dwar l-istatus ta' saħħa ta' diversi gruppi u ta' kif jakkwistaw mis-soċjetà l-htigġijiet għal kura tagħhom pereżempju bil-ġbir, bl-ipproċessar u bl-analizzar ta' l-istatistiċi mqassma skond il-grupp soċjali, l-isfond etniku u s-sessi;*

Justification

Greater understanding of the health of various groups is required to form a sound basis for measures to promote more equal health.

Emenda 126
Anness 2, Objettiv 5, punt 6, subpunkt 6.1. b (ġidid)

6.1.b *Gbir u analizi ta' dejta dwar fatturi relatati dwar l-istil ta' ħajja (e.g. nutriment u tabakk u l-konsum ta' l-alkohol) u dwar korrimenti, it-twaqqif ta' registri ta' l-Ewropa kollha fil-każ ta' mard serju (e.g. il-kancer), u l-iżvilupp ta' metodologiji u tal-manutenzjoni tad-'database'.*

Emenda 127
Anness 2, Objettiv 5, punt 6, subpunt 6.7.

6.7. L-iffukar fuq il-provvediment ta' sors ta' informazzjoni regolari u ta' min joqgħod fuqu liċ-ċittadini, lil dawk li jieħdu d-deċiżjonijiet, lil pazjenti, lil dawk inkarigati mill-kura, lil profesjonisti tas-saħħha u lil partijiet oħra interessati;

6.7. L-iffukar fuq il-provvediment ta' sors ta' informazzjoni regolari u ta' min joqgħod fuqu liċ-ċittadini, anke f'formati aċċessibbli għal persuni b'dizabilità, u lil dawk li jieħdu d-deċiżjonijiet, lil pazjenti, lil dawk inkarigati mill-kura, lil profesjonisti tas-saħħha u lil partijiet oħra interessati;

Justification

It is crucial that the most vulnerable groups, which are often the ones also excluded from access to mainstream information, are provided with health information as elaborated within this programme.

Emenda 128

Anness 2, Objettiv 5, punt 6, subpunt 6.7.a (ġidid)

6.7.a Ġbir u analizzar ta' dejta dwar dizabilitajiet kif ukoll il-ġlieda kontrihom u l-prevenzjoni tagħhom;

Justification

It is essential to include actions relating to the collection and analysis of data concerning disabled people.

Emenda 129
Anness 2, Objettiv 5, punt 6, subpunt 6.8.a (ġidid)

6.8.a Ġbir u analizzar ta' dejta dwar il-fertilità sekondarja;

Justification

One in six couples at the present time have fertility problems. It is therefore worth studying the situation and identifying the factors which affect fertility, which could also be attributable to environmental factors.

Emenda 130
Anness 2, Objetiv 5, punt 6, subpunt 6.8.b (ġidid)

6.8.b Il-provvediment ta' informazzjoni aġġornata dwar il-prezz ta' prodotti farmaċewtiċi individwali, ibbażata fuq l-ingredjent attiv, fl-Istati Membri differenti;

Justification

Prices of similar pharmaceutical products with the same active ingredient vary to a very large extent from one Member State to another. EU citizens should be able to inform themselves about these price differences as a means to increase competition in the pharmaceutical sector.

Emenda 131
Anness 2, Objetiv 5, punt 5.2. (ġidid)

5.2. TITTEJJEB IL-KOMUNIKAZZJONI MAĊ-ĊITTADINI TA'L-UE FIR-RIGWARD TAL-KWISTJONIJIET TAS-SAHHA BIŻ-ŻIEDA FIL-VALUR TA'L-INIZJATTIVI TAL-KOMUNITĀ U TA'L-ISTATI MEMBRI

5.2.1. Kampanji ta' žieda fl-gharfien.

5.2.2. Sondaġġi.

5.2.3. Konferenzi, seminars, laqgħat ta' l-experti u tal-partijiet li għandhom sehem.

5.2.4. Pubblikazzjonijiet dwar kwistjonijiet ta' interess għas-sahħha.

5.2.5. Provvediment ta' informazzjoni online.

5.2.6. Żvilupp u użu ta' punti ta' informazzjoni.

Justification

Change of numbering. Modified version of the point 1 of original Annex. Member States are best placed to communicate directly to citizens in their countries. The Commission can add value by encouraging exchange of good practice and comparing successful public health initiatives.

Emenda 132

Anness 2, Objetiv 5, subtitolu 2 (ġidid) wara l-punt 5.2. (ġidid)

KOPERAZZJONI U INTEGRAZZJONI

Emenda 133

Anness 2, Objetiv 5, punt 5.3. (ġidid)

5.3. ŻIEDA FIL-PARTEĆIPAZZJONI TAS-SOĊJETÀ ČIVILI U TAL-PARTIJIET LI GHANDHOM SEHEM, FIT-TFASSIL TAL-POLITIKA RELATATA MAS-SAHHA

5.3.1. Promozzjoni u tishih ta' l-organizzazzjonijiet tas-sahħha fil-livell tal-Komunità.

5.3.2. Tahrig u tishih tal-kapaċitā għall-organizzazzjonijiet tas-sahħha.

5.3.3. Netwerking ta' organizzazzjonijiet tas-sahħha mhux governattivi u ta' partijiet oħra li għandhom sehem.

5.3.4. Tishih ta' korpi konsultattivi u ta' mekkaniżmi fil-livell tal-Komunità.

5.3.5 Rikonoxximent li l-pazjenti għandhom drittijiet ukoll bhala konsumaturi tal-kura tas-sahħha;

Justification

Change of numbering. Modified version of the point 2 of original Annex 1. Patients in the EU today are healthier and better informed than ever. Health care has changed and become more professional, embracing a broader spectrum of players. Patients now need not only protection but also the ability to make use of the medical advances and differentiation in the health sector, which should be reflected in the legislation, particularly in terms of information and the right to freedom of choice in health care.

Emenda 134
Anness 2, Objettiv 5, punt 5.4. (ġdid)

5.4. ŽVILUPP TA' APPROČĊ GHALL-INTEGRAZZJONI TA' PUNTI RIGWARD IS-SAHHA F'POLITIKI TALKOMUNITĀ OHRA

5.4.1. Žvilupp u applikazzjoni ta' metodi biex janalizzaw l-impatt tal-politiki u ta' l-attivitàjet tal-Komunità fuq is-sahha.

5.4.2. Skambju ta' l-aqwa prattika ma' l-Istati Membri dwar il-politiki nazzjonali.

5.4.3. Studji dwar l-impatt ta' politiki ohra fuq is-sahha.

5.4.4. Žvilupp ta' strategiji kongunti u ta' azzjonijiet kongunti bil-holqien ta' holoq u b'sinerġiji mal-programmi, ma' l-azzjonijiet u mal-fondi tal-Komunità relevanti.

Justification

Replaces amendment 86. There must be close coordination between health actions and other community policies.

Emenda 135
Anness 2, Objettiv 5, subtitolu 3 (ġdid) wara l-punt 5.5.

RISKJI, SIKUREZZA U KWISTJONIJIET ORIZZONTALI

Emenda 136
Anness 2, Objettiv 5, punt 5.5. (ġdid)

5.5. *PROMOZZJONI TAL-KOPERAZZJONI INTERNAZZJONALI FIR-RIGWARD TAS-SAHHA*

5.5.1. *Miżuri ta' koperazzjoni ma' l-organizzazzjonijiet internazzjonali.*

5.5.2. *Miżuri ta' koperazzjoni ma' pajjiżi terzi li m'humiekk jipparteċipaw fil-programm.*

5.5.3. *Inkoraggiament tad-djalogu bejn l-organizzazzjonijiet tas-sahha.*

Justification

Change of numbering. Modified version of the point 4 of original Annex 1.

Emenda 137
Anness 2, Objettiv 5, punt 5.6.(ġdid)

5.6. *TITJIB FL-GHARFIEN MINN KMIENI, FL-ANALIŻI U FIL-KOMUNIKAZZJONI TAR-RISKJI PERMEZZ TA' DAN LI ĜEJ:*

5.6.1. *Appoġġ għal parir xjentifiku u għal analiżi tar-riskju, inkluži l-hidmiet tal-kumitatati xjentifċi indipendenti stabbiliti bid-Deciżjoni tal-Kummissjoni 2004/210/EC¹.*

5.6.2. *Il-ġbir u l-kollazzjoni ta' l-informazzjoni u t-twaqqif ta' netwerks ta' speċjalisti u ta' istituti.*

5.6.3. *L-ippromowtjar ta' l-izvilupp u ta' l-armonizzar tal-metodologiji ta' l-analiżi tar-riskju.*

5.6.4. *Azzjonijiet għal ġbir u għal analiżi ta' informazzjoni dwar l-espożizzjoni ta' popolazzjonijiet u ta' gruppi sekondarji għal perikli kimiċi, bijoloġiči u fiziċi għas-sahħha , inkluži l-effetti ta' dawn il-perikli.*

5.6.5. *It-twaqqif ta' mekkaniżimi*

*fir-rigward ta' l-gharfien minn kmieni ta'
riskji imminent u ta' azzjoni dwar l-ahħar
riskji identifikati.*

5.6.6. Strategji biex tittejjeb il-komunikazzjoni tar-riskju.

5.6.7. Taħriġ fl-analizi tar-riskju.

¹ ĠU L 66, 4.3.2004, p. 45.

Justification

Change of numbering. Modified version of the point 5 of original Annex 1.

Emenda 138
Anness 2, Objettiv 5, punt 5.7. (ġdid)

**5.7. PROMOZZJONI TAS-SIKUREZZA TA'
L-ORGANI, TA' SUSTANZI TA' ORIĆINI
UMANA, TA' DEMM U TA' DERIVATTIVI
TAD-DEMM**

*5.7.1. Attivitajiet li jgħinu biex
tittejjeb is-sikurezza u l-kwalità ta' l-
organi u ta' sustanzi ta' origini umana,
inkluż demm, komponenti tad-demm u
prekursuri tad-demm.*

*5.7.2. Strategiji u mekkaniżmi ta'
appoġġ għall-promozzjoni ta' trapjant ta'
donatur haj u biex jindirizzaw il-kwistjoni
tan-nuqqas ta' organi filwaqt li jītqiesu l-
kunsiderazzjonijiet etiċi.*

*5.7.3. Żvilupp u hdim ta'
pjattaformi komuni bejn donaturi u
recipjenti għat-twaqqif ta' l-aqwa prattika
fir-rigward ta' l-organi u tas-sustanzi ta'
origini umana.*

*5.7.4. Il-ħolqien ta' kard Ewropea
ta' donaturi ta' l-organi.*

Justification

*First sub-point originally in Annex 1, point 6.5. The two new sub-points complement
the first one. Additional improvement and development of measures in the field of*

organ transplants.

Creating an organ donor card valid throughout Europe will help to make valuable and safe organs and substances of human origin available for purposes of medical treatment throughout Europe and afford access to them everywhere in the Community.

Emenda 139

Anness 2, Objettiv 5, punt 5.8. (ġdid)

5.8. KWISTJONIJIET ORIZZONTALI

Assistenza teknika ghall-analizi ta' kwistjonijiet relatati ma' l-iżvilupp u ma' l-implementazzjoni ta' politiki u ta' legiżlazzjoni.

Justification

Additional improvement and development of joint actions to promote Community synergy.

Emenda 140

Anness 3

Dan l-anness tkassar

Justification

This amendment is in accordance with the decision by Conference of Presidents to split the programme. Annex 3 is covered by the report on the Consumer Protection Programme.

NOTA SPJEGATTIVA

Introduction

Public health is a commodity of prime importance and its protection concerns everyone without exception. The introduction of health protection into the Charter of Fundamental Rights (Article 11-35) officially sets out this generally held conviction and, at the same time, the obligation to give it prominence as a major priority of the European Union.

In particular, the Treaties require the Community to play an active role in the field of public health by taking measures which cannot be taken by the Member States. Article 152 of the Treaty sets out three objectives for Community action - improving public health, preventing disease in all its forms and obviating sources of danger. It also provides for Community coordination and cooperation with the Member States to support actions in the field of public health, while competence and responsibility for health services (hospitals etc.), lie with the Member States (subsidiarity principle). Drawing up action programmes allows the Commission to shape and develop policy and action in the field of public health in order to achieve the objectives of the Treaty.

1. Background to the proposal for a decision

On 6 April 2005, the Commission submitted a proposal for a decision of the European Parliament and of the Council⁴ establishing a programme of Community action in the field of health and consumer protection 2007-2013; Article 251 was specified as the procedure under which that decision would be taken, i.e. the co-decision procedure between the European Parliament and the Council. In specific terms, the proposal for a decision concerns the establishment of a programme covering two separate articles of the EC Treaty, Article 152 concerning public health and Article 153 concerning consumer protection. The Community has in fact previously adopted two separate programmes on the basis of these articles, viz. the general framework for financing Community actions in support of consumer policy for the years 2004-2007⁵, with a budget of € 81.8 million (annual average € 20.45 million), and the current Community action programme in the field of public health 2003-2008⁶, with a budget of € 354 million (annual average of € 59 million), which is the first integrated programme in the field of public health.

2. Remarks on procedure - decision to split the programme

In the explanatory memorandum to the proposal for a decision, the Commission points out that the programmes in the Union are fragmented and that the actions in the fields of consumer protection and public health share common objectives. Although the simplification and rationalisation of Community programmes may be an objective, the merger of the two areas of policy into a single programme cannot disguise the different nature of those areas of policy and the different level of involvement of the Union.

⁴ COM(2005) 115 final.

⁵ Decision No. 20/2004, OJ L 5, 09.01.2004.

⁶ Decision No 1786/2002/EC, OJ L 271, 9.10.2002.

On 30 June 2005, the Conference of Presidents of the European Parliament approved splitting the proposal into two parts, while the two committees responsible (the Committee on the Environment and the Committee on the Internal Market) were asked to ensure that the reports to be submitted would not contain contradictory amendments to one or the other part of the legislative proposal, and that the splitting of the proposal would enable the Committee on Budgets to examine the budgetary aspects of all elements of the proposal.

Your rapporteur must also stress that each area, i.e. public health and consumer protection, has its own priorities and specific features, and each is both multi-faceted and complex. Consequently, when we address both of these vast and sensitive areas simultaneously, there is a risk that we focus our attention only on their common points and do not cover all of the aspects involved. Everything therefore points to two separate programmes so that each subject can be dealt with fully. This does not prevent the Commission's departments from managing the two programmes jointly, in particular on points where they overlap.

Review of the Union's second health programme

The split into two programmes has prompted your rapporteur to submit a number of amendments to produce a cohesive and substantive health programmes which meets the requirements of the EU and the aspirations as well as the needs of the public for better health for all. Without a doubt, the experience gained from the first programme, for which it was my honour to be the EP's rapporteur, has made an instrumental contribution to my proposal.

Two additional points in the second programme, ensuing from the experience already gained from implementation of the first programme, distinguish it from the first: (a) synergy between the national health systems with a view to improving efficiency and effectiveness as an individual objective and (b) additional actions to consolidate further the capacity to achieve the individual objectives.

As with the first programme, the new programme is characterised by a holistic approach both towards health and towards the means, mechanisms and practices for tackling health problems. It is the approach which must be adopted in order to improve, at Community level, not only the quantity of information disseminated but also its quality and, at the same time achieve more effective support and coordination for everyone involved in the health sector. Whether in the private or public sector, help must be given to stakeholders to draw up and develop the priorities of the programme, focusing throughout on the cohesion and coordination of its actions.

Among those actions, prominence should be given to the correct treatment of diseases and injuries through information about best medical practice in order to prevent further loss of health status. However, even in the case of chronic diseases and disabilities, care should be available which enables sufferers to have a better quality of life. Consequently, a significant part of the actions should concern medical care and treatment.

The programme is an invitation and, at the same time, a challenge to all to contribute to ensuring more effective prevention, improved health services, and a better quality

of life. It should not be overlooked in this respect that there are existing differences in health services between the Member States and between areas within the same Member State as well as inequalities in access to good health services for citizens. Bridging these gaps, in combination with synergy between the national health services, is therefore an important aspect of the programme.

The objectives of the programme

The objectives of the programme as set out in my proposal are as follows:

- to protect citizens against health threats,
- to promote policies that lead to a healthier way of life,
- to contribute to the development of more effective and efficient health systems,
- *to improve information and knowledge in order to further the development of health and to incorporate the objectives of the policy implemented in the fields of health in other Community policies (mainstreaming)..*

The programme will also contribute to:

- ensuring a high level of protection for human health when formulating and implementing all Community policies and activities,
- promoting a holistic approach to health,
- tackling health inequalities,
- encouraging cooperation between the Member States in the fields covered by Article 152 of the Treaty.

Actions and support measures for the objectives

The new programme includes the following actions:

- promoting health and access to information so that European citizens are in a position to make beneficial choices for health,
- responding to health threats in a coordinated manner at European level, as in the case of epidemics, diseases such as HIV/AIDS, bioterrorism etc.,
- preventing disease by tackling health determinants such as those related to lifestyle (diet, smoking, consumption of alcohol) as well as to additional factors, genetic, environmental, socio-economic etc. which demonstrably affect both physical and mental health,
- preventing further loss of health status of an individual by means of applying sound medical practice and the most modern methods of treating diseases. It is also obvious that the criterion for evaluating treatment cannot be the financial cost but the effectiveness, which is also a long-term financial consideration.
- ensuring, by means of information, the best possible treatment for sufferers of chronic disease and disabilities, which will offer them a corresponding quality of life,
- bridging the gaps at the level of Member States' health systems and the inequalities faced by European citizens in gaining access to good health services, and the appropriate treatment. These inequalities as a rule affect social groups with shared characteristics, be they unemployed, isolated, with personal and family difficulties, often immigrants, with chronic diseases, often mental illness and/or disability,

- collecting and analysing data through the programme in order accurately to inventory 'health status' in the European Union and to promote actions to restore a converging tendency in the Member States in this field by means of information, information campaigns, synergy with other Community actions and funds, through non-governmental organisations and the promotion of best practice,
- improving communication with citizens by providing them with the necessary information on how to stay in good health, the effects of lifestyle, appropriate treatment options when they are ill and how to lead a better life with a chronic disease or a disability.

Implementation and coordination

The cooperation of the Commission both with the Member States and international organisations, such as the World Health Organisation, and specialised centres, such as the European Centre for Disease Prevention and Control, is essential for exchanges of views and the promotion of health measures. The Member States are also required to play an important role given that much of the data will come from them. Their cooperation is essential for the collection and processing of data and potential implementation of new policies and approaches with appropriate coordination on health-related matters, as important mechanisms and instruments are available to them. Your rapporteur considers that coordination of the programme is a substantial and essential factor in its success and that the 'open coordination method' may help in matters relating to subsidiarity by strengthening strategies in the field of health and healthcare, such as patient mobility.

Budget

One aspect which your rapporteur considers to be extremely important is the budget. The objectives must always be matched by the resources available to achieve them. In your rapporteur's view, there is no guaranteed match between these two in the proposed programme. The actions under the programme, as described, are extremely wide-ranging and ambitious and therefore cannot be achieved with a limited budget. Moreover, the Commission's proposal contained another two new objectives in addition to the three declared objectives of the first programme.

Your rapporteur therefore proposes the amount of € 1, 200 million in the certainty that the Council and the Commission will realise that this proposal is perfectly reasonable and will facilitate the smooth implementation of the 2007-2013 health programme. Neither should we overlook for one moment the fact that public health is one of the EU's major priorities compared with all other policies. This development demonstrates the exceptional importance of public health and, therefore, its protection as a response to existing needs and challenges as well as the great interest shown by European citizens who are also demanding effective action in this field.

27.1.2006

OPINION OF THE COMMITTEE ON BUDGETS

for the Committee on the Environment, Public Health and Food Safety

on the proposal for a decision of the European Parliament and of the Council establishing a programme of Community action in the field of health and consumer protection (2007-2013) - Health aspects
(COM(2005)0115 – C6-0097/2005 – 2005/0042A(COD))

Draftsman: Anders Samuelsen

SHORT JUSTIFICATION

BACKGROUND

	2007	2008	2009	2010	2011	2012	2013 and later	TOTAL

On April 6 2005, the Commission submitted a proposal for a decision establishing a programme for Community action in the field of Health and Consumer Protection.

Merging the two previous and distinct programmes for health and consumer protection into one common framework based on different legal bases, the Commission estimates that a common framework would create synergies between the two policy areas because there are considerable overlaps in objectives, strategies and tools.

On June 30 2005, the Conference of Presidents of the European Parliament decided to split up the programme anew. The health related part was directed to the Environment Committee as lead.

In both responsible Committees, the rapporteurs favoured a permanent separation of the programme.

The total financial framework including human resources proposed by the Commission for the period January 1 2007 to December 31 2013 is EUR 1 203 million. The schedule of commitments/appropriations proposed concerning the Health part including cost of human resources is as follows:

Operational Expenditure								
Common objectives Health and consumers CA	7,606	9,532	11,146	13,890	18,767	24,146	25,895	110,981
Operational Expenditure								
Health Part -CA	49,928	64,34	76,042	96,411	135,62	183,495	199,159	804,995
Administrative Expenditure	8,945	10,681	12,543	14,102	15,332	15,535	16,046	93,185
C.A. + Admin. Expenditure	66,479	84,553	99,731	124,403	169,719	223,176	241,1	1009,161

With respect to the allocation of resources, the Commission proposes the following breakdown of the total EUR 1 109 815 million budgeted for operational expenditures from 2007-2013:

- EUR 110 981 million (10%) are to be spent on common objectives,
- EUR 804 995 million (72,5%) are to be spent on protecting citizens against health threats,
- EUR 193 818 million (17,5%) are to be spent on consumer protection.

DRAFTSMAN PROPOSAL

The two responsible rapporteurs suggest substantial increases in the financial framework (EUR 1 200 million for the Health Protection Programme and EUR 233,46 million for the Consumer Protection Programme). Your draftsman wants to point out that the appropriations indicated in the proposal for a decision are purely for guidance until an agreement is reached on the financial perspective for the period 2007-2013. Regarding this particular point, two amendments are tabled to the draft legislative resolution and one to Article 5.

Your draftsman supports the request to separate the programme and underlines that separate programmes do not prevent the Commission from managing the two programmes jointly, in particular on points where they overlap.

There are well founded concerns that the expected synergies will not be as substantial as expected and relevant stakeholders have made a strong case that health and consumer interests are served best in a separate framework. Whilst it is commonly agreed that actions in the fields of consumer protection and public health share common objectives, it is also true that the areas are different in nature and characterised by a different level of involvement of the Union. Hence, a program that addresses the two complex areas simultaneously has a built-in risk of ignoring aspects that are unique to one of the two areas:

- On the macro level, the policy-areas rely on a different legal basis within the European Community. On the micro level users of public health services cannot in every respect be treated as 'pure' consumers. This might constrain rather than evoke mutual benefits.
- Each sector has greater certainty when it has its own budget. For instance, the 'consumer side' has voiced concern that it - already the budgetary minor - will

lose funding because savings on health protection could be argued to have more dramatic (short term) consequences than savings on consumer policy.

- The economics of scale suggested by the Commission are not sufficiently substantiated by the extended impact assessment (SEC(2005)0425).

AMENDMENTS

The Committee on Budgets calls on the Committee on the Environment, Public Health and Food Safety, as the committee responsible, to incorporate the following amendments in its report:

I. Drafts legislative resolution

Amendment 1

Paragraph 1 a (new)

- 1a.** *Stresses that the appropriations mentioned in the legislative proposal for the period after 2006 are object to the decision on the next multiannual financial framework;*

Amendment 2

Paragraph 1 b (new)

- 1b.** *Calls on the Commission to submit, where appropriate, a proposal to adjust the financial reference amount for this programme once the next multiannual financial framework has been adopted;*

Justification

Amendments emphasizing that the amounts proposed are subject to confirmation by a possible multiannual financial framework.

II. Proposal for a decision

Text proposed by the Commission⁷

Amendments by Parliament

Amendment 3

Recital 3

- (3) Whilst maintaining the core elements and specificities of actions on health and

- (3) Whilst maintaining the core elements and specificities of actions on health and

⁷ OJ C .., 8.12.2005, p.

consumer protection, a single integrated programme should help to maximise synergies in objectives and efficiency in administration of actions in these areas. ***Combining health and consumer protection activities in a single programme should help to meet joint objectives on protecting citizens from risks and threats, increasing the ability for citizens to have the knowledge and opportunity to make decisions in their interest and supporting mainstreaming of health and consumer objectives in all community policies and activities.*** Combining administrative structures and systems should enable more efficient implementation of the programme and help to make best use of available Community resources for health and consumer protection.

consumer protection, a single integrated programme should help to maximise synergies in objectives and efficiency in administration of actions in these areas. Combining administrative structures and systems should enable more efficient implementation of the programme and help to make best use of available Community resources for health and consumer protection.

Justification

The economics of scale suggested by the Commission when merging Health and Consumer programme are not substantial.

Amendment 4 Recital 4

(4) Health and consumer protection policies share common objectives relating to protection against risks, improving decision-making of citizens and integrating health and consumer protection interests in all Community policies, ***as well as common instruments such as communication, capacity-building for civil society regarding health and consumer protection issues, and promoting international cooperation on these issues.*** Issues such as diet and obesity, tobacco and other consumption-related choices related to health are examples of cross-cutting issues affecting both health and consumer protection. ***Taking a joint approach to these common objectives and instruments will enable activities common to both health and consumer protection to be undertaken more efficiently and effectively.*** There are also separate

(4) Health and consumer protection policies share common objectives relating to protection against risks, improving decision-making of citizens and integrating health and consumer protection interests in all Community policies. Issues such as diet and obesity, tobacco and other consumption-related choices related to health, ***and high-risk behaviours*** are examples of cross-cutting issues affecting both health and consumer protection. ***Counterfeiting, which both deceives consumers and is a danger to their health, should also be vigorously combated at European level.*** There are also separate objectives relating to each of the two areas of health and consumer protection which should be addressed through actions and instruments specific to each of the two areas.

objectives relating to each of the two areas of health and consumer protection which should be addressed through actions and instruments specific to each of the two areas.

Justification

Action to combat counterfeiting, which is tantamount to the theft of products and trade-marks, should be stepped up at European and international level. Counterfeiting deceives consumers, is a danger to health and destroys jobs (it is estimated that 100 000 jobs in the European Union are lost every year as a result of counterfeiting).

Amendment 5
Recital 6

(6) It is of general European interest that the health, safety and economic interests of citizens, as well as consumer interests in the development of standards for products and services, be represented at Community level. Key objectives of the programme may also depend on the existence of specialised network that also require Community contributions to enable them to develop and function. Given the particular nature of the organisations concerned and in cases of exceptional utility, the renewal of Community support to the functioning of such organisations should not be subjected to the principle of gradual decrease of the extent of Community support.

(6) It is of general European interest that the health, safety and economic interests of citizens, as well as consumer interests in the development of standards for products and services, be represented at Community level. Key objectives of the programme may also depend on the existence of specialised network that also require Community contributions to enable them to develop and function. ***Therefore, full use of the tool of a "Framework Partnership agreement" proposed by the Implementing Rules to the Financial Regulation must be made.*** Given the particular nature of the organisations concerned and in cases of exceptional utility, the renewal of Community support to the functioning of such organisations should not be subjected to the principle of gradual decrease of the extent of Community support.

Justification

Article 163 of the Implementing Rules of the Financial Regulation enables the Commission to establish a longer term partnership with a given organisation. Full use of this tool will provide the relevant health organisations with more financial certainty and reduce the administrative burden of both the Commission and the European health organisations

Amendment 6
Article 3 paragraph 2, point (b)

(b) 60 % of expenditure for the functioning of a body pursuing an aim of general European interest where such support is necessary to ensure representation of health or consumer interests at Community level or to implement key objectives of the programme, except in case of exceptional utility where the Community contribution shall not exceed 95 %. ***The renewal of such financial contributions may be exempted from the principle of gradual decrease.***

(b) 60 % of expenditure for the functioning of a body pursuing an aim of General European interest where such support is necessary to ensure representation of health or consumer interests at Community level or to implement key objectives of the programme, except in cases of exceptional utility where the Community contribution shall not exceed 95 %.

The Commission can, as the general rule, seek to grant core funding on a two years basis by means of a network partnership convention. In accordance with Article 163 of the Implementing Rules of the Financial Regulation such a partnership establishes a long-term cooperation between the recipient and the Commission, but shall not exceed two years.

Justification

The application of Article 163 of the Implementing Rules of the Financial Regulation will provide the relevant health organisations with more financial certainty and reduce the administrative burden of both the Commission and the European health organisations. Core financing is, contrary to project funding, by nature distributed to organisations which pursue long term objectives. Therefore, the possibility of establishing a long-term co-operation is especially suited to applicants for core funding.

Amendment 7 Article 5, paragraph 1

1. The financial framework for the implementation of ***the programme for the period specified in Article 1*** is EUR 1 203 million

1. The ***indicative*** financial framework for the implementation of ***this instrument is set at EUR 1 203 million for the period of 7 years as from 1 January 2007***

Justification

Amendments emphasising that the amounts proposed are subject to confirmation by a possible multiannual financial framework. Once decided, the Commission shall present a legislative proposal in order to determine the final reference amount.

Amendment 8 Article 5, paragraph 1 a (new)

1a. The overall administrative expenditure of the programme including internal and management expenditure for the Executive Agency referred to in Article 3, paragraph 1a should be proportionate to the tasks provided for in the programme concerned and is subject to the decision of the budgetary and legislative authorities.

Justification

The appropriations allocated to the Agency should comply with the overall ceiling established for the Agencies. this will ensure availability of resources for the financing of the actions of the programme.

Amendment 9
Article 5, paragraph 2 a (new)

2a. The Commission shall ensure that the financial provisions for the funding of the programme comply with the provisions of the Financial Regulation applicable to the general budget of the European Communities.

Justification

Any derogation within the basic act should be in line with the provisions the Financial Regulation.

Amendment 10
Article 5, paragraph 2 b (new)

2b. Access to financial contributions shall be facilitated by the application of the principle of proportionality as regards the documents to be supplied and by the creation of a database for the submission of applications.

Justification

The methods and the procedures need to be simplified in order to speeding up the transparency of the selection procedure and facilitate access to the programme.

Amendment 11

Article 10, paragraph 3

3. The Commission shall ensure that the programme is evaluated three years after its start and following the end of the programme. The Commission shall communicate the conclusions hereof, accompanied by its comments, to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions.

3. The Commission shall ensure that the programme is evaluated three years after its start, ***two years before its end and*** following the end of the programme. The Commission shall communicate the conclusions hereof, accompanied by its comments, to the European Parliament, the Council, the European Economic and Social Committee and of the Regions.

Justification

Consideration of the programme's future should be made in due time to ensure careful planning and democratic discussion of possible reforms.

Amendment 12 Annex 1, point 1.1 a (new)

1.1a. Better provision of information to consumers on the risks posed to their health by counterfeit medicinal and other products.

Justification

Counterfeiting deceives consumers and is a danger to their health.

PROCEDURA

Title	Proposal for a decision of the European Parliament and of the Council establishing a programme of Community action in the field of health and consumer protection (2007-2013) - Health aspects	
References	COM(2005)0115 – C6-0097/2005 – 2005/0042A(COD)	
Committee responsible	Environment, Public Health and Food Safety	
Opinion by Date announced in plenary	BUDG 9.6.2005	
Enhanced cooperation – date announced in plenary	No	
Draftsman Date appointed	Anders 9.6.2005	Samuelson
Previous draftsman		
Discussed in committee	24.1.2006	25.1.2006
Date adopted	25.1.2006	
Result of final vote	+: unanimity -: 0:	
Members present for the final vote	Herbert Bösch, Simon Busuttil, Paulo Casaca, Brigitte Douay, Bárbara Dührkop Dührkop, Markus Ferber, Neena Gill, Ingeborg Gräßle, Louis Grech, Catherine Guy-Quint, Jutta D. Haug, Anne E. Jensen, Wiesław Stefan Kuc, Alain Lamassoure, Janusz Lewandowski, Vladimír Maňka, Mario Mauro, Giovanni Pittella, Wojciech Roszkowski, Anders Samuelson, Esko Seppänen, Nina Škottová, László Surján, Helga Trüpel, Yannick Vaugrenard, Kyösti Tapio Virrankoski, Marilisa Xenogianakopoulou	
Substitute(s) present for the final vote	Lidia Joanna Geringer de Oedenberg, Margarita Starkevičiūtė	
Substitute(s) under Rule 178(2) present for the final vote		
Comments (available in one language only)		

PROCEDURA

Title	Proposal for a decision of the European Parliament and of the Council establishing a programme of Community action in the field of health and consumer protection (2007-2013) - Health aspects			
References	COM(2005)0115 – C6-0097/2005 – 2005/0042A(COD)			
Date submitted to Parliament	6.4.2005			
Committee responsible Date announced in plenary	ENVI 9.6.2005			
Committee(s) asked for opinion(s) Date announced	BUDG 9.6.2005			
Not delivering opinion(s) Date of decision	IMCO 4.7.2005			
Rapporteur Date appointed	Antonios Trakatellis 24.5.2005			
Discussed in committee	10.10.2005	28.11.2005	23.1.2006	31.1.2006
Date adopted	31.01.2006			
Result of final vote	+: -: 0:	53 1 1		
Members present for the final vote	Adamos Adamou, Liam Aylward, Johannes Blokland, John Bowis, Frederika Brepoels, Hiltrud Breyer, Dorette Corbey, Chris Davies, Mojca Drčar Murko, Edite Estrela, Jillian Evans, Karl-Heinz Florenz, Matthias Groote, Françoise Grossetête, Satu Hassi, Gyula Hegyi, Caroline Jackson, Christa Klaß, Eija-Riitta Korhola, Holger Krahmer, Urszula Krupa, Peter Liese, Jules Maaten, Linda McAvan, Roberto Musacchio, Riitta Myller, Péter Olajos, Miroslav Ouzký, Vittorio Prodi, Frédérique Ries, Dagmar Roth-Behrendt, Guido Sacconi, Karin Scheele, Horst Schnellhardt, Kathy Sinnott, Jonas Sjöstedt, Boguslaw Sonik, María Sornosa Martínez, Antonios Trakatellis, Thomas Ulmer, Marcello Vernola, Anja Weisgerber, Åsa Westlund			
Substitute(s) present for the final vote	Margrete Auken, María del Pilar Ayuso González, Philip Bushill-Matthews, Bairbre de Brún, Milan Gaša, Genowefa Grabowska, Jutta D. Haug, Karin Jöns, Caroline Lucas, Miroslav Mikolášik, Ria Oomen-Ruijten, Alojz Peterle			
Substitute(s) under Rule 178(2) present for the final vote				
Date tabled	9.2.2006			
Comments (available in one language only)				