

Featured Stories



European Mutuals' Statute

AIM Conference with MEP Berlinguer for a European Mutual statute

Mutuals add value to Europe



Medical Devices

The New Regulation Proposal was published on 26 September

[Read AIM Position on Medical Devices Recast](#)



Clinical Trials

The New Regulation Proposal was published on 17 July



Panel of independent experts to work on the improvement of health care systems

[Council decision of 5 July](#)

Contents:

AIM and You	2
European Institutions	2
<i>EU Council</i>	2
<i>Pharmaceuticals and Medical Devices</i>	3
<i>Active and Healthy Ageing</i>	5
<i>Health System</i>	5
<i>European Mutuals' Statute</i>	6
<i>Social services</i>	7
<i>Health and Long-term care</i>	7
Health Events in Europe	10

OCTOBER 2012: AIM Events' Calendar

Next Meeting and visit dates

5 October	European affairs WG in Brussels
6-7 November	E-health Study trip in Berlin <i>Open to all AIM Members</i>
28-29 Nov.	AIM Board of Directors meetings and Conference on healthy ageing
30 Nov.	Health System Reform WG in Brussels Fight against fraud WG in Brussels
7 December	Pharmaceuticals and Medical Device Working Group in Brussels
12 December	European affairs WG in Brussels

TF: Task Force
WG: Working Group

mon.	tue.	wed.	thu.	fri.	sat.	sun.
1	2	3	4	5 EU Affairs WG	6	7
8	9 Data Protection Hearing	10 Data Protection Hearing	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

AIM and you

➤ *AIM Activities in September*

On 5 and 6 September, **AIM's Presidium** gathered in Berlin.

On 12 September AIM was represented at the **AGE Coalition**, in the frame of the European Year of Active Ageing

On 26 September AIM organized in Collaboration with AMICE and MEP Berlinguer the Conference on the European Mutual Statute: '**Mutuals add Value to Europe**'. Presentations are available on [request](#).

On 2nd October AIM was represented by Christian Horemans (MLOZ) at the Notre Europe Seminar "**A statute for European mutuals? Advantages, limits and legal and political obstacles**".

➤ *Working Groups*

On 25th July the **Fight against Fraud Working Group** gathered in AIM to discuss the Programme of its working Group.

On 29th August and 26th September, the **Mutuals' values Working Groups** gathered to discuss preparation of the Conference and next steps.

On 19th September the **Pharmaceuticals and Medical Devices Working Group** gathered to discuss the latest regulations: Clinical Trials, Medical Devices and Transparency Directive.

On 27th September, the **e-learning Working Group** had its first conference call meeting. To participate to this new AIM Working Group, members should contact the [Secretariat](#).

➤ *Members' news*

Irina Odnoletkova from the Belgian Member MLOZ represented AIM at the HTA Stakeholder Conference in Venice on 3rd September.

Arielle Garcia from the French member FNMF represented AIM at the Conference on Trends in services to person industries in the European Union in the European Economic and Social Committee in Nicosia, Cyprus on 6th September.

(If you would also like to communicate information about your activities in the Flash, please contact the [Secretariat](#).)

European Institutions

➤ *EU Council*

Active and Healthy Ageing: Council Conclusions on demographic challenges

The Employment and Social Policy Council (EPSCO) meeting on 21st and 22nd June ministers adopted [Council Conclusions](#) on the demographic challenges by strengthening the participation of all in the labour market and in society, as well as by improving pension adequacy. The ministers outlined 7 priorities in these conclusions:

- Youth employment:
- Older persons: employment, active participation and independent living
- Gender equality on the job market
- Children poverty, with the mention of "adequate social protection"
- Active inclusion and participation: including "further improve health and social services", as well as more integrated health and social care systems
- Adequate and Sustainable Pensions
- Financing through appropriate tools

Preparation of the Irish Presidency January-June 2013

The Irish EU Affairs Minister, Ms Creighton stated the priorities of the coming Presidency. The new Clinical Trials Directive and a new medical Devices Directive

(with its national importance as an Irish export driver) will form the centrepiece of Presidency health agenda. Decisions in these areas will support the creation of high-skill jobs in Ireland and help to make the Union a global leader in this area. Ireland's approach to innovation in health (Europe 2020) and the proposed eHealth week will also place a spotlight on Ireland's role in the pharmaceuticals and medical devices area.

The Irish Presidency is part of the new Trio Irish-Lithuanian-Greek presidency (programme)



➤ **Pharmaceuticals and Medical Devices**

Medical Devices: New Medical Devices Regulation proposal

On 26 September the awaited [proposal](#) of the European Commission for Medical Devices and the second proposal for In-Vitro Diagnostics were published, together with a [Communication](#) on Safer, more effective and innovative medical devices and an Impact Assessment ([Executive Summary](#)).

AIM had already expressed its views on the Commission's position on the Medical Devices recast in its [Position Paper](#) together with ESIP, ISDB and MIEF.

According to the European Commission, the new rules aim to ensure that patients, consumers and healthcare professionals can reap the benefits of safe, effective and innovative medical devices. Health and Consumer Policy Commissioner John Dalli said in the [Press Release](#) "*Just a few months ago, everybody was shocked by the scandal involving fraudulent breast implants which affected tens of thousands of women in Europe and around the world. As policy makers, we must do our best never to let this happen again. This damaged the confidence of patients, consumers and healthcare professionals in the safety of the devices on which they rely every day. The proposals adopted today significantly tighten the controls so as to ensure that only safe devices are placed on the European Union's market at the same time, they foster innovation and contribute to maintaining the competitiveness of the medical device sector.*"

Main elements of the proposals include:

- Wider and clearer scope of EU legislation, extended to include, for example, implants for aesthetic purposes, Stronger supervision of independent assessment bodies by national authorities;
- More powers and obligations for assessment bodies, to ensure thorough testing and regular checks on manufacturers, including unannounced factory inspections and sample testing;
- Extended database on medical devices, providing comprehensive and public information on products available on the EU market.
- Better traceability of devices throughout the supply chain, enabling a swift and effective response to safety concerns. A Unique Device Identification system will be introduced to enhance post-market safety of medical devices, to help to reduce medical errors and to fight against counterfeiting;
- Stricter requirements for clinical evidence, to ensure patient and consumer safety;

See also for information:

- [Eucomed Press release](#), welcoming the text but expressing concern about scrutiny procedure

- [BEUC Press release](#), for a more patient-friendly perspective

- AIM [Position Paper](#) with ESIP, ISDB and MiEF prior to the publication of the new proposal.

To consult all documents related to the new Regulation, please refer to the dedicated Commission [page](#).

Clinical Trials: New Clinical trials proposal

The new proposal of the European Commission was published on 17 July 2012. John Dalli presented the proposal in these words in a [speech](#) on 18 September for an event on Personalised Medicines: "*The key objective of the proposed revision is to strengthen knowledge and innovation in clinical research, thereby ensuring that the EU remains an attractive place for medical research.*"

The revision aims to respond to the decline of clinical trials in the EU in recent years by seeking to reduce unnecessary bureaucracy for industry and academia, and to facilitate multi-national clinical trials.

[...] The main issues under consideration relate to the authorisation process, where we want to simplify and streamline procedures and facilitate the application for multinational trials".

At the occasion of an Event organised by European Voice on 24 September, the European Patients' Forum also expressed its views on the proposal and pointed to:

- The patient involvement in the assessment of Clinical Trials,
- Equal standards of Information to patients,
- A broader publication of results.

See the [Press Release](#) and the full text of the [Proposal](#).

Pharmacovigilance: Implementation of new pharmacovigilance legislation

The new legislation was proposed by the European Commission in 2008 and adopted by the European Parliament and the Member States in December 2010. Highlights of the new legislation include:

- Establishment of a new scientific committee, the Pharmacovigilance Risk Assessment Committee (PRAC);
- Clarification of the roles and responsibilities of all actors involved in the monitoring of the safety and efficacy of medicines in Europe and strengthened coordination, leading to more robust and rapid EU decision-making;
- Engagement of patients and healthcare professionals in the regulatory process, including direct consumer reporting of suspected adverse drug events;
- Improved collection of key information on medicines, e.g. through risk-proportionate, mandatory post-authorisation safety and efficacy studies;
- More transparency and better communication, including publication of agendas and minutes of the PRAC and the possibility to hold public hearings.

The first meeting of the PRAC took place on 19 and 20 July 2012. All Member States have nominated their members. The European Commission has appointed six independent scientific experts who will also serve as members. The nomination of PRAC members representing patients and healthcare professionals will follow a new public call for expressions of interest. You can find more information in the [Press Release](#) and on the European Medicines Agency [pages](#) on the new Pharmacovigilance legislation.

Pharmacovigilance: MEPs want to improve the detection of potentially dangerous medicines

MEPs have been discussing plans to improve the safety of medicines in the EU

Distilbène, Mediator, Isomeride: they are all drugs once sold legally in Europe but now believed to have provoked serious side effects including hundreds of deaths. An urgent review of medicine monitoring systems in the EU is essential according to MEP Linda McAvan, who is responsible for steering legislation on this through Parliament. An agreement on a revision of the legislation was negotiated after talks between the Parliament, the Council and the Danish presidency. MEPs will vote on it during the plenary session in Strasbourg. The aim of the agreement is to better detect potentially unsafe medicines and speed up action to take them off the market.

The changes proposed in the agreement include:

- If a company decides not to renew a marketing licence due to safety reasons, this will automatically trigger an emergency evaluation at EU level.
- When companies voluntarily withdraw a drug, they must specifically declare if it due to a safety concern
- All drugs subject to a post-authorisation safety study will be labelled, so patients are aware of what they are taking

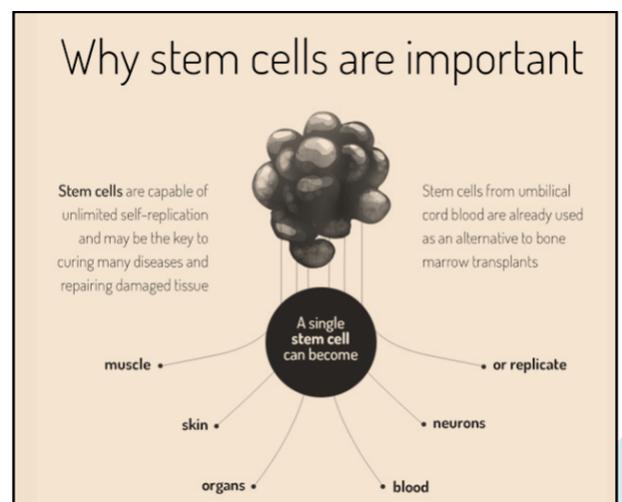
The full article is available on the Parliament's [website](#).



Stem cells: how donation could prove to be the gift of life

Stem cells are increasingly becoming more important in the treatment of diseases, which is why sufficient supplies are needed. A report proposing ways to boost EU stem cells and cord blood reserves through a regulated and unpaid system will be discussed by MEPs in plenary on Monday 10 September. Tory MEP Marina Yannakoudakis, from Britain, calls in her report for a transparent system based on voluntary and unpaid donations of tissues and cells. Apart from skin tissue, vessels and amniotic membrane, the donation usually comes from a deceased donor.

Cord blood donation, from which stem cells are derived, play a very important role. There is increasing evidence that these cells can be used in the treatment of diseases, including childhood illnesses. To increase the availability of national cord blood samples, common standards should be enforced in national and private banks.



Although a recent ruling in the United States means the sale of blood stem cells will be allowed there, Ms Yannakoudakis believes that in the EU donation should be carried out on a voluntary and unpaid basis. The full article is available [here](#).

➤ *Active and Healthy Ageing*

Tobacco: Commission's 'Ex-smokers' campaign wins two prestigious Euro EFFIE Awards

Ex-smokers are Unstoppable" received the golden award for the category general healthcare. In addition, the campaign received the special EFFIE award for best demonstration of innovation in magazine or newspaper advertising.

The Euro EFFIE award aims to promote and recognise excellence in marketing communications among campaigns that have proven effective in at least two European countries. "Ex-Smokers are Unstoppable" is a European initiative covering all 27 countries of the European Union. It aims to inspire and help the EU's 28 million smokers in the 24 to 35 age bracket quit smoking. The campaign's effectiveness is demonstrated in the 220 000 Europeans now seeking to quit smoking with its free online health tool iCoach.

After just three months, 40% of iCoach users surveyed reported that they had quit smoking. With this latest success, "Ex-Smokers are Unstoppable" has become the first anti-smoking campaign to be recognised at the Euro Effies. For more information, please visit the campaign website, available in all EU languages: www.exsmokers.eu.



➤ *Health System*

Public Health: Panel of independent experts to work on the improvement of health care systems

The Commission adopted on 5 July a [Decision](#) to set up an independent expert panel, to identify effective ways of investing in health and to make healthcare systems sustainable. The panel will support the reflection process recently initiated by Member States - at the request of the Council. Demographic changes, costly innovation, and rising patients' expectations put constant pressure on the financial sustainability of European health systems. For these reasons, as well as due to the fiscal constraints spawned by the financial crisis, many European Member States have embarked on health system reforms in order to ensure a sustainable provision of high quality care to their citizens. While the management of health services is clearly the competence of Member States, there is immense value in stronger cooperation at European level. Through the reflection process, Member States have committed themselves to sharing experiences and information about good practices. They will soon be able to summon the Commission's expert panel for independent guidance at EU level.

This panel will be made up of 17 experts, from several areas of expertise, such as primary care, hospital care, pharmaceuticals, research and development, prevention and health promotion, system financing, information systems and patient registers and health inequalities. Read the [Press Release](#). The call should be made public beginning of October.

➤ *Insurance*

State Aid: Commission requests Ireland to end unlimited guarantee for Voluntary Health Insurance Board

The European Commission has proposed to Ireland under EU state aid rules to abolish the unlimited state guarantee enjoyed by the Voluntary Health Insurance Board (VHI) by the end of 2013. VHI is a statutory body offering voluntary health insurance. Its statute does not provide for liquidation or winding up, with the consequence that VHI cannot go bankrupt. As a result, its creditworthiness is improved, providing VHI with an undue financial advantage over its competitors. If no agreement is reached on the proposed measures within one month, the Commission may open a state aid investigation.



In response to concerns raised by the Commission regarding the distortions of competition created by the unlimited guarantee, Ireland undertook to abolish its effects. To ensure its effective repeal, the Commission requested Ireland in particular to:

(i) Progressively incorporate one or several subsidiaries of VHI as private limited companies, which would take over all of VHI's economic activities by 31 December 2013 at the latest and would be governed by the common Irish company law;

(ii) Ensure that, whatever the final structure and sequencing of the implementation of the appropriate measures, the effective removal of the unlimited guarantee is completed by 31 December 2013.

The unlimited guarantee deriving from VHI's legal form as a statutory body would thus cease to benefit an economic activity and therefore no longer raise state aid concerns. For more information read the [Press Release](#).

Insurance News: Slovakia wants to nationalise private health insurers

Slovakia's Prime Minister Robert Fico plans to reduce national healthcare to a single state-owned insurer by 2014, and this would mean the nationalisation of two private health insurers or buying them.

The government wants to introduce a system of one health insurer instead of several health insurers. Fico says, "Privately-owned health insurers should leave the Slovak market. Slovakia's health care system has been suffering from a lack of funding, while private insurers turn a profit based on public money."

The current health care system in Slovakia is a form of private-public partnership, where all Slovaks pay a healthcare tax of 14%, and can choose cover provided by one of the three providers, who provide cost-free treatment. The two private health insurers, Union, owned by Dutch insurer Achmea, and Dobra, controlled by Slovak-Czech private equity group Penta Investments, provide cover for 1.8 million of a total 5.4 million Slovaks. The state owned General Health Insurance Company, better known as VsZP, provides coverage for the remaining 3.6 million.

The insurers then pay doctors and hospitals, but there is no difference between the quality of health care for state-insured and private-insured clients.

As a local company, Penta has to be very careful what they say and so has said it will listen to government plans. But Achmea has said it will use all official and legal channels to protect the business interests of Union, and is not interested in selling Union or its portfolio to the state. If it invokes EU law on protectionism it could take many years for any legal battle to be concluded, and as a large EU health insurer Achmea has the financial and political muscle to thwart tiny Slovakia.



➤ **European Mutuals' Statute**

EMS: 'Mutuals Add Value to Europe Conference'

Mutuals in Europe gathered around the European Mutual Statute on 26 September, invited by MEP Luigi Berlinguer,



Rapporteur on the Own-initiative report on the European Mutual Statute.

AIM and AMICE had prepared this conference together in the AIM-AMICE Task Force.

Speaking for AIM, **Mr Pedro Bleck Da Silva**, Chairman of the Mutuals' Working Group at AIM gave a detailed presentation on why Mutuals need a European Mutual Statute.

The event featured presentations of developing mutual over all Europe:

- In Great Britain, with [Mutuo](#),
- In France-Belgium-Portugal with the project UNMS-MGEN: [Solidaris](#)
- In France and Italy with MGEN and Fondo Salute
- In Slovenia with [Vzajemna](#)

Read the AIM-AMICE [Press Release](#) announcing the Conference.



From Left to Right: MEP Birgit Sippel, MEP Berlinguer, Pedro Bleck Da Silva, (Montepio), Asmo Kalpala (AMICE), Julie Savary (MGEN), Alain Coheur (UNMS), MEP Bastos, Patricia Toucas.

AIM thanks all speakers and participants for their participation to a fruitful event.

EMS: 'A statute for European mutuals? Advantages, limits and legal and political obstacles'

On 2nd October, the Think-Tank founded by Jacques Delors, Notre Europe, organised a Seminar dedicated to the European Mutual Statute. MEP Pervenche Bérès, Chairwoman of the Employment and Social Affairs Committee reminded that mutuals are a pillar of the European social model and that they need a statute both to defend their specific characteristics in Europe and also to promote unique values that are at the core of the European Union's foundation: Solidarity and Cooperation.

Mr Christian Horemans (MLOZ) represented the AIM and stressed that mutuals play an additional role compared to private insurers: indeed, a social role. Mutuals need to keep their values in the move to internationalisation and mergers, which is why they need a European Mutual Statute to have a level-playing field with the other actors. Mr Apostolos Ioakimidis, from the European Commission reminded the procedure rules within the Institutions and explained the purpose of the next Consultation asking for a need on European Mutual Statute as soon as the Panteia report, ordered by the Commission is published.

See the Programme of the event on Notre Europe's [page](#) and a related Notre Europe [Policy Brief](#) by Marie-José Fleury "*The mutualist economy: what is their foreseeable future in the Single Market?*".

➤ **Social Services**

Public Authorities: EU launches prize for innovative public authorities

The European Commission has today launched a competition to find the most innovative public authorities in Europe. Up to nine prizes of €100,000 each will be awarded to successful, existing public initiatives that benefit citizens, firms or the education and research sector. The purpose of the prize is to encourage and highlight modern approaches to public spending, which accounted on average for half of EU gross domestic product in 2010. There is no pre-defined list of projects that could qualify. Examples could include: networking platforms for SME start-ups; initiatives that provide special assistance for the elderly, eco-friendly public transport, new approaches to vocational training or facilitating entrepreneurship of researchers. The competition is open to public authorities established in an EU Member state or a country associated to the EU's research framework programme. Submitted initiatives must have been on-going for between one and four years. The deadline for applications is February 15, 2013. The winners of the "European Prize for Innovation in Public Administration" will be selected on the basis of four criteria: the economic impact of their initiative; its relevance to challenges facing society; how original and easy to replicate the idea is; and how they plan to use the prize money. It is intended that prize money be used by winning administrations to scale up and expand their initiatives, thereby leveraging and inducing further excellence and innovation in the public sector. The prize winners are expected to be announced in spring 2013. For more information please visit the competition [website](#).

Posted Workers: Protection for workers posted abroad within the EU

A new legislative proposal to boost protection for workers posted abroad was debated by Employment and Social Affairs Committee MEPs and external experts on 18 september.

"This hearing confirmed comments that the European Commission proposal may make it more difficult for the European companies to post workers within the internal market. MEPs should have the ambition to come up with a text that removes the legal uncertainties and improves the protection of posted workers, without impeding the free

provision of services. A text that could spur the sense of responsibility of companies, workers and social partners", said rapporteur Danuta Jazłowiecka (EPP, PL).

"The abuses suffered by Polish employees at construction sites like Flamanville in France illustrate how crucial it is to ensure stronger protection of posted workers in EU legislation. In this regard, the implementing directive appears to be a unique opportunity to combat social dumping in Europe", declared Employment and Social Affairs Committee Chair Pervenche Berès (S&D, FR). See [Press Release](#)

Health and Long-term care

➤ *Trends in health system*

European Development Aid: How to be more effective without spending more?

Development policy is one of the main instruments that the European Union has at its disposal to make its voice heard in the international arena. Indeed, official development assistance (ODA) with origin in the EU represents more than half total aid spending worldwide. However, the EU is having a hard time to be seen as an influential global player and is involved in a process of adapting its structures and policies to have the strong voice that its economic and political power should bring.

In the field of development policy, three are the main challenges that the EU is facing: the fragmentation of European development aid (with 27+1 European donors that do not fully coordinate their actions); the changing development environment resulting from the rise of emerging economies; finally, the current fiscal stringency (which translates into a need to mobilize new sources to supplement conventional ODA).

This [Policy Paper](#) by Elena Muñoz Gálvez discusses ways of enhancing the efficiency and coherence of EU development aid. After presenting the major issues at debate on how to improve EU development spending, the author evaluates how the Commission's proposal on development financing for 2014-2020 ranks along these issues, and formulates some proposals for improvement.

Read the Whole policy Paper on Notre Europe's [Website](#).

(Article suggested by the French member FNMF. For any suggestions of articles, e-mail the [Secretariat](#)).

European Commission Aid: Strengthening social protection in EU development cooperation

The Commission presented the first ever Commission [Communication](#) on social protection in international development. It outlines how future EU aid should work to help putting in place social protection policies and systems. Despite the recent growth in the world's economy, social protection still remains an unachieved goal for billions of people. Too often, the most vulnerable members of society (women, children, the disabled, the elderly, etc.) are left behind the creation of wealth. The lack of social protection represents a strong obstacle to the long-term and sustainable development of middle and low income countries. The Communication explains how EU development cooperation can support the strengthening of social protection policies and systems. It includes proposals such as supporting nationally-owned policies, introducing measures to support job creation and employment, bringing in the civil society and the private sector, and tackling the underlying causes of vulnerability – particularly those that affect women – to readdress the balance, but also sharing EU experience in the matter. These proposals have been made after a broad consultation process which over 250 stakeholders and 17 Member states took part in. They will be discussed by EU Development ministers and the European Parliament in the coming months.

European Commission Aid: The European Union supports access to healthcare for four million people in Tunisia

The European Commission has adopted a new project worth EUR 12 million to reduce inequalities in access to healthcare in the 13 most disadvantaged regions in southern and western Tunisia; these regions account for 40% of Tunisia's population. The project will directly benefit four million people by significantly increasing access to basic healthcare, improving its quality and creating better conditions in healthcare centres. The project's main actions will cover purchasing equipment for out-patient services, acquiring new medical transport vehicles and building capacity for the Health Ministry.

Support for health is one of the priorities of EU-Tunisian cooperation. This aid takes on particular importance in the context of the country's current democratic transition: supporting basic services is a key factor in promoting regional development and helping the poorest sections of the population with the most acute needs.

Specifically, the services offered, such as examinations and specialised services, will be expanded and the quality of healthcare at basic and intermediate health centres will be improved. For example, early screening for chronic diseases associated with an aging population will be made generally available. See the [Press Release](#).



WHO: Expanding prepayment key to universal health coverage

Health insurance systems hold untapped potential for achieving universal coverage of health services. A study of countries in Asia and Africa published in this month's Bulletin of the World Health Organization, found that community and social health insurance schemes in these countries increase financial protection by reducing the need to pay for health services at the point of delivery. More information in the WHO [article](#)

WHO Europe: 53 countries to set new European health roadmap for 2020 and beyond

(From left) Dr Ray Busuttil, Malta's Superintendent of Public Health; Zsuzsanna Jakab, WHO Regional Director for Europe; Dr Joseph R. Cassar, Malta's Minister of Health, the Elderly and Community Care; and Dr Kenneth Grech, Permanent Secretary in Malta's Ministry of Health, the Elderly and Community Care, at the press conference. Photo: Department of Information, Malta Copenhagen and St Julian's, 7 September 2012



Health ministers and senior officials from the 53 countries in the WHO European Region are gathering in Malta next week

to vote on an ambitious long-term WHO European policy for health and well-being, Health 2020.

Health 2020, the new European policy framework, aims to maximize opportunities for promoting population health and reducing health inequities. It recommends that European countries address population health through whole-of-society and whole-of-government approaches. Health 2020 emphasizes the need to improve overall governance for health through a clear focus on the social determinants of health.

"The Health 2020 policy is an innovative roadmap. It sets out our new vision and forms the basis of the strategic health priorities for our Region in the years ahead," said Ms Zsuzsanna Jakab, WHO Regional Director for Europe. "Health 2020 provides a unique Region-wide platform for sharing expertise and experience, so that, at a time of economic downturn, we leverage our individual strengths and multiply our health gains." For more information read the whole [article](#) by WHO.

WHO Europe: European Immunization Week 2012

In 2012, all 53 Member States in the WHO European Region took part in European Immunization Week (EIW), a milestone in the initiative's seven-year history. Such widespread support is particularly critical for the Region as Member States work to eliminate measles and rubella by 2015 and to maintain Europe's polio-free status. The vital role of health workers, as the most trusted source of information about vaccines, was also in focus.

Further, 2012 marked the first time that all WHO regions joined together for a World Immunization Week, giving a global perspective to the initiative.

WHO/Europe defined key messages and encouraged participating countries to focus on them during EIW 2012, adapting them to national needs and situations. One of these highlighted the vital role played by front-line health workers in national immunization programmes and the importance of providing support to enable them to be strong advocates for immunization.

This support includes the online Immunization Resource Centre, which was established by WHO/Europe and includes job aids for health workers to use when discussing vaccination with their patients. Additional tools will be added to the Resource Centre. WHO/Europe also produced a short film, in which health workers from around the Region described how they discuss vaccine issues with parents.

➤ **Studies**

EU Commission: A selection of successful projects funded by the EU Health Programmes

http://ec.europa.eu/health/programme/docs/success_stories_full_en.pdf

Notre Europe Study: “The mutualist economy: what is their foreseeable future in the Single Market?”

http://www.notre-europe.eu/uploads/tx_publication/Mutuals_SingleMarket_MJ-Fleury_NE_August12.pdf

Annual report 2011 of European Medicines Agency

[European Medicines Agency](#) - The Annual report shows continuously high level of activities

Active Ageing Report

<http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=1632&furtherNews=yes>

Sustainability of Ageing- LEPAS

<http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=1639&furtherNews=yes>

Health events in Europe

02/10, Brussels (9.30am - 4.15pm)	Notre Europe Seminar: <i>“Mutual societies in the 21st century Europe: What challenges and perspectives?”</i> With AIM Member Mr Christian Horemans, MLOZ (BE)
03/10, Brussels	European Social and Economic Committee Conference: <i>“Social Enterprises and the Europe 2020 Strategy”</i> With AIM President, Mr Jean-Philippe Huchet FNMF (FR)
09-10/10, Brussels	Interparliamentary Hearing: <i>“The reform of the EU Data protection framework”</i> in the European Parliament
16/10, Brussels	European Policy Centre Event <i>Role of ICT in supporting active healthy ageing: possibilities and barriers?</i> With AIM Member, Dr Jan Van Emelen, MLOZ (BE)
18/10, Nicosia	EU Council Conference on Occupational Safety and Health
21-24/10, Berlin	<i>World Health Summit</i>
10/12, Nicosia	Closing Conference for the European Year for Active Ageing, and Solidarity between Generations

The monthly AIM Flash is compiled by Ph. Swennen and Blandine Cassou-Mounat.

Realisation & Layout: Blandine Cassou-Mounat

For more information on one of the topics mentioned above, please contact the AIM Secretariat.

'AIM Flash' © monthly publication of the AIM Secretariat

AIM asserts copyright in all the text of this publication. Reproduction of short extracts is welcome provided the source is quoted. Reproduction of complete articles requires written permission in advance from the AIM office.