

# Building an EU health hub: Experiences from the last TSI project & future outlook

Dimitra Panteli  
PROMIS Winter School, 5.3.2026

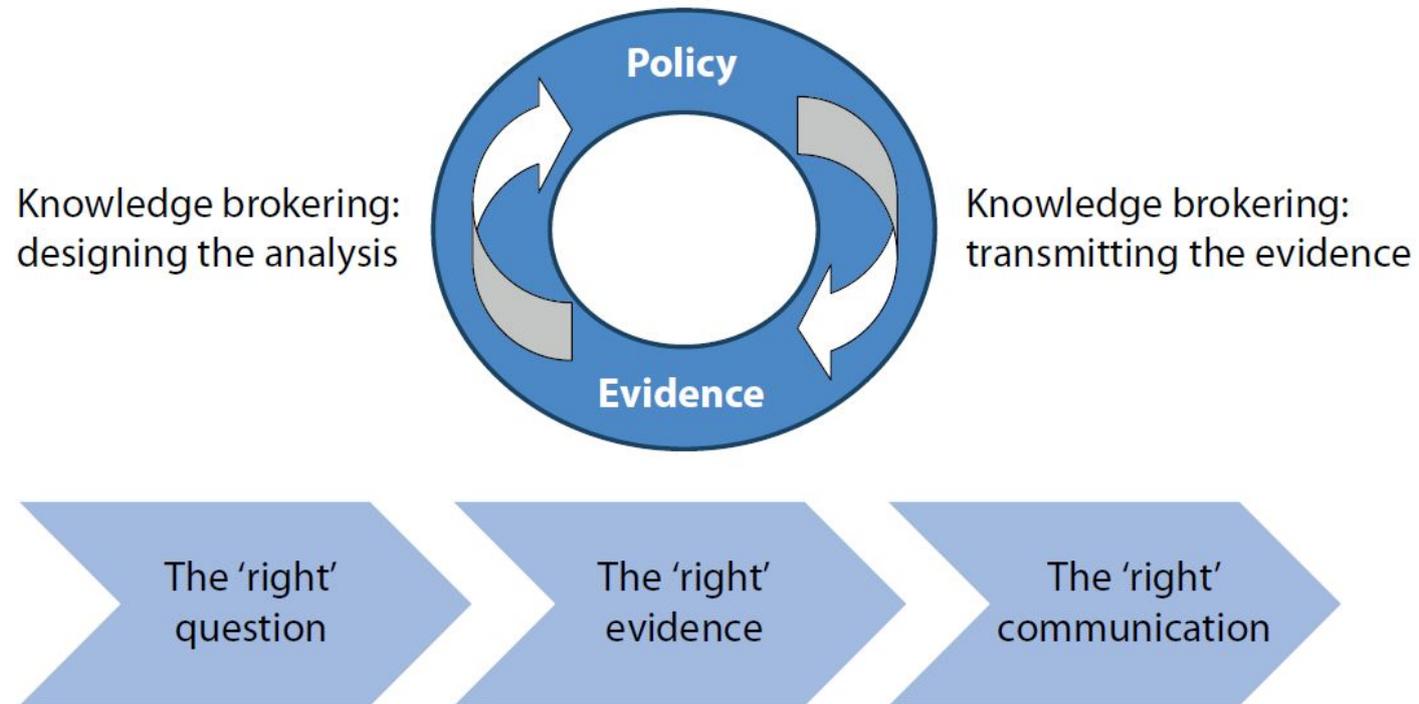
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# The Observatory is...

1. A WHO hosted partnership building bridges between policy makers and research and across countries
2. A collection of Member States, EU, decision makers, academics & health system actors who are **focused on generating and communicating evidence for policy**
3. A project that delivers for countries through its **4 functions:**
  - **Country monitoring**
  - **Policy analysis**
  - **Health systems performance assessment and**
  - **Knowledge brokering**
4. A resource for **planners, policy and decision makers**

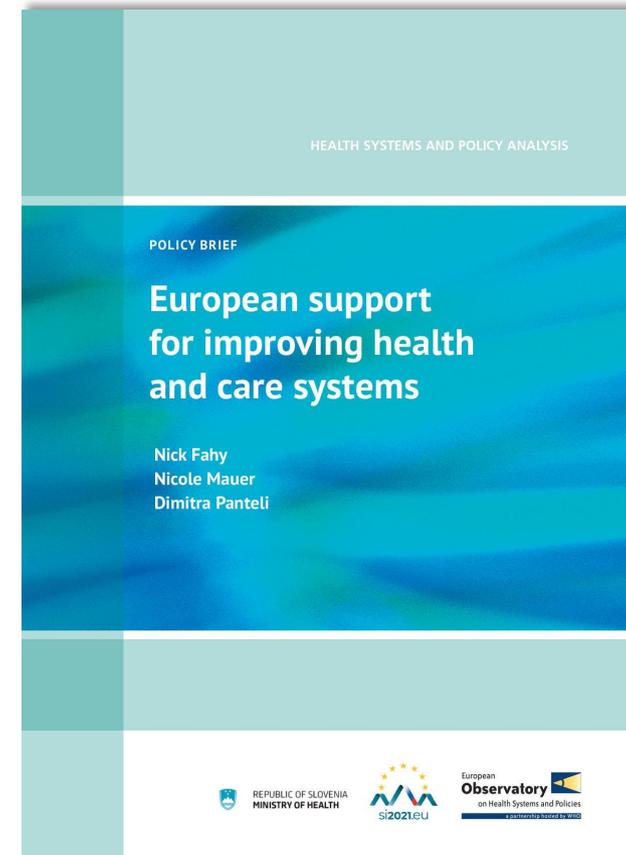
# The OBS model of supporting decision makers and tailoring evidence outputs



# Policy Brief: How can we capitalise on EU tools?

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- 2021 Slovenian Presidency: mapping of European Union support for improving health and care systems
- Though health systems are primarily the responsibility of Member States, the EU provides an increasingly shared context
- A wide range of EU tools related to health systems have grown up over time
  - Not always clear what is available and how to access
  - How can these tools be combined effectively?

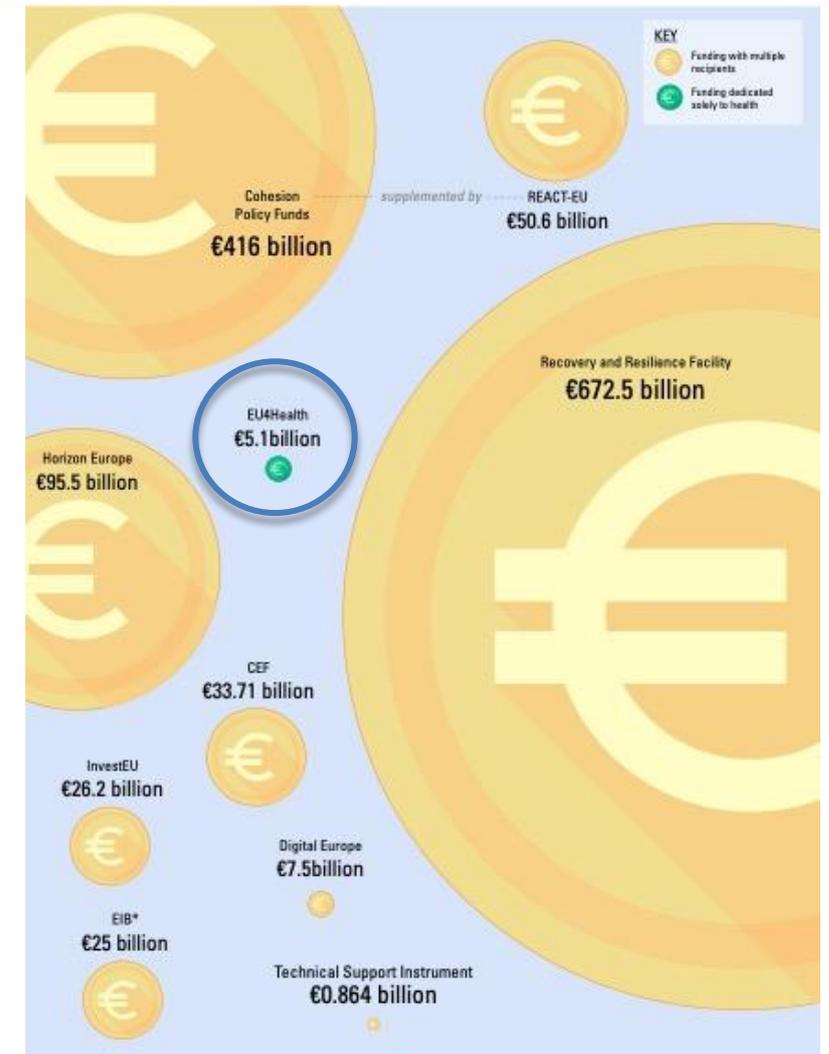


# Maximising EU support requires combining tools

## Comparative size of different EU funding tools:

EU4Health is the only tool dedicated exclusively to health

⇒ need for a one-stop shop approach for Health, to provide clarity and support for Member States



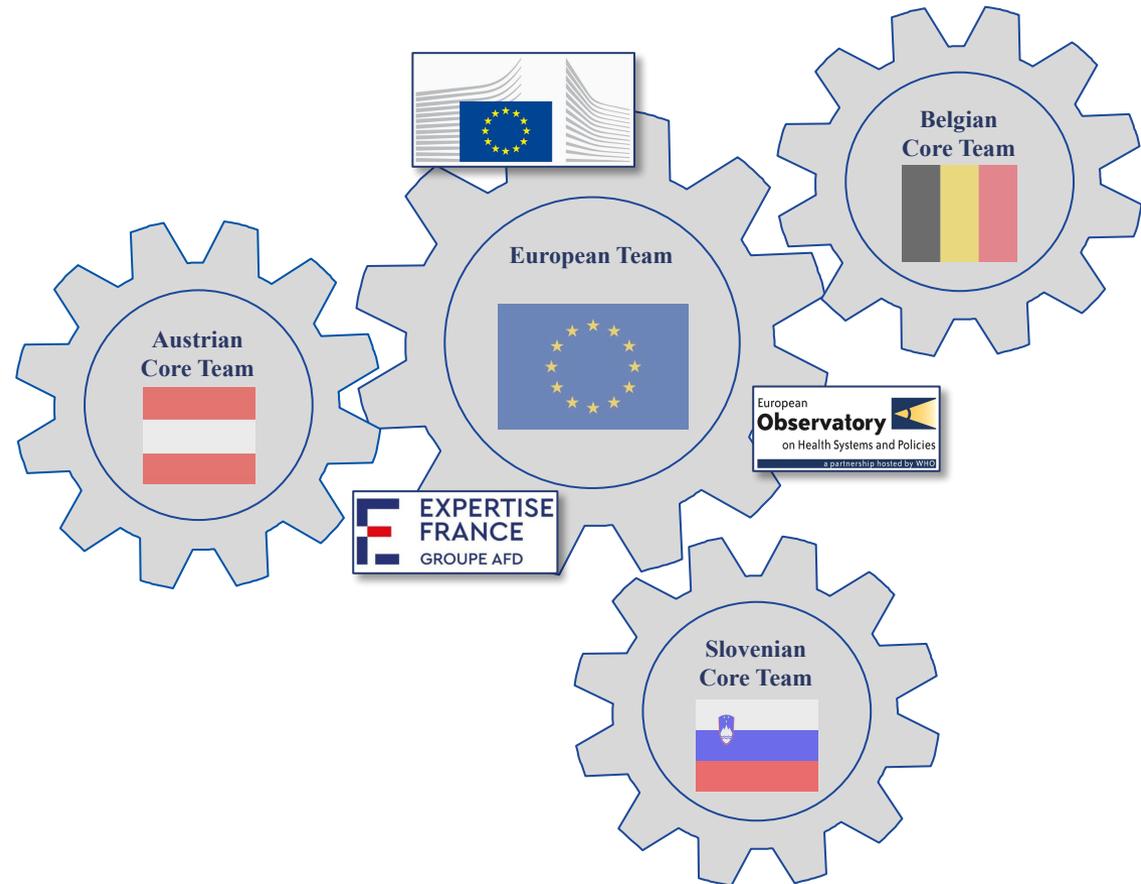
# TSI 2022 – 2024: Resources hub for sustainable investment in health

## A multistakeholder project with two workstreams

**Work stream 1: Making the case for public investment in health**

**Work stream 2: ‘One-stop-shop’ EU Health Resources Hub**

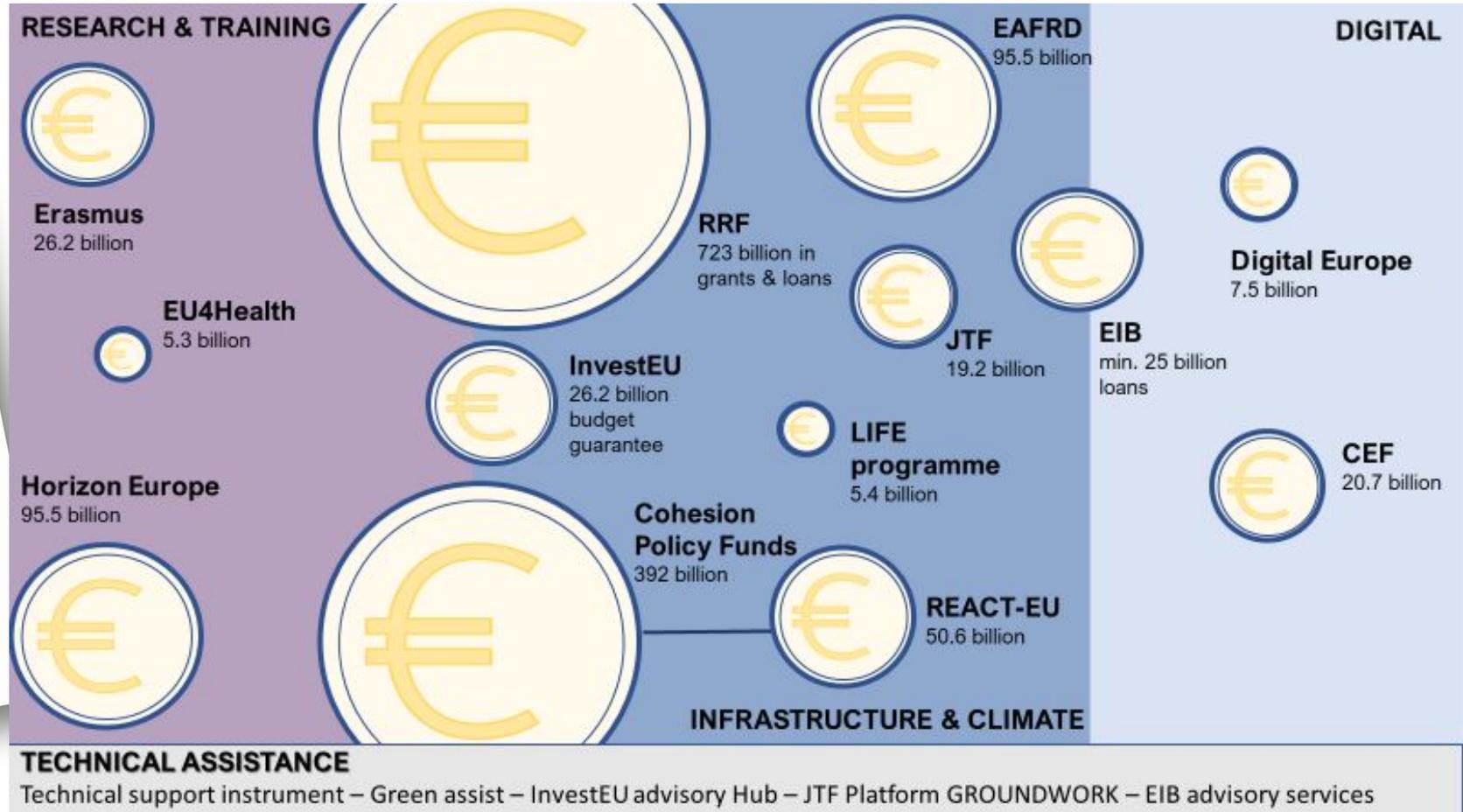
- Austria: Greening health care facilities
- Belgium: Implementing population health management for integrated care
- Slovenia: Strengthening primary health care through a telephone triage system



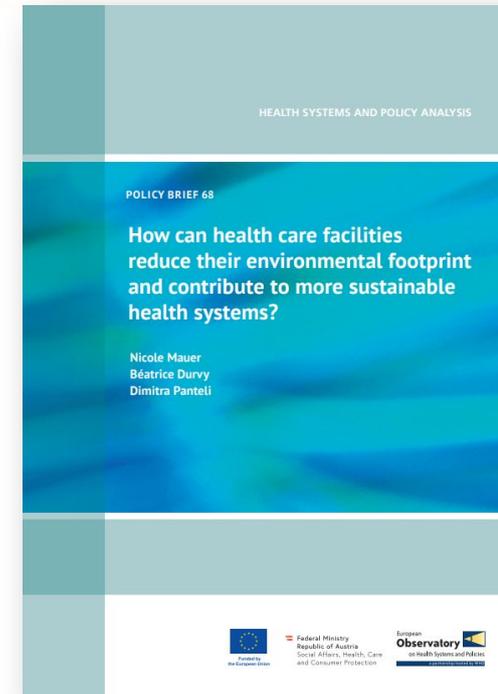
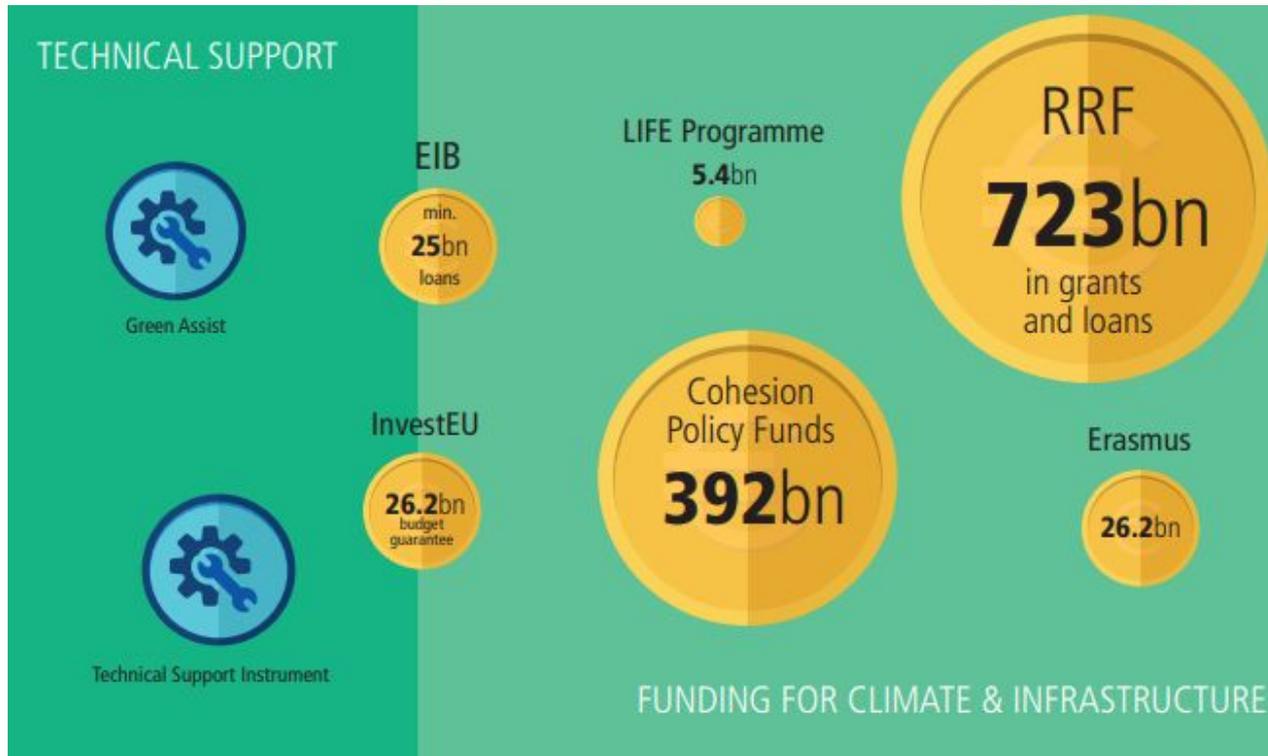
Adapted from Knoll & Fornaroli, 2024



# WS 2: EU resources for investing in and strengthening health systems



# EU instruments relevant for Austria's greening needs



Two greening projects were supported in preparing their applications for funding under the LIFE programme based on mapping of EU funding opportunities



# The EU has many instruments that can potentially support health systems

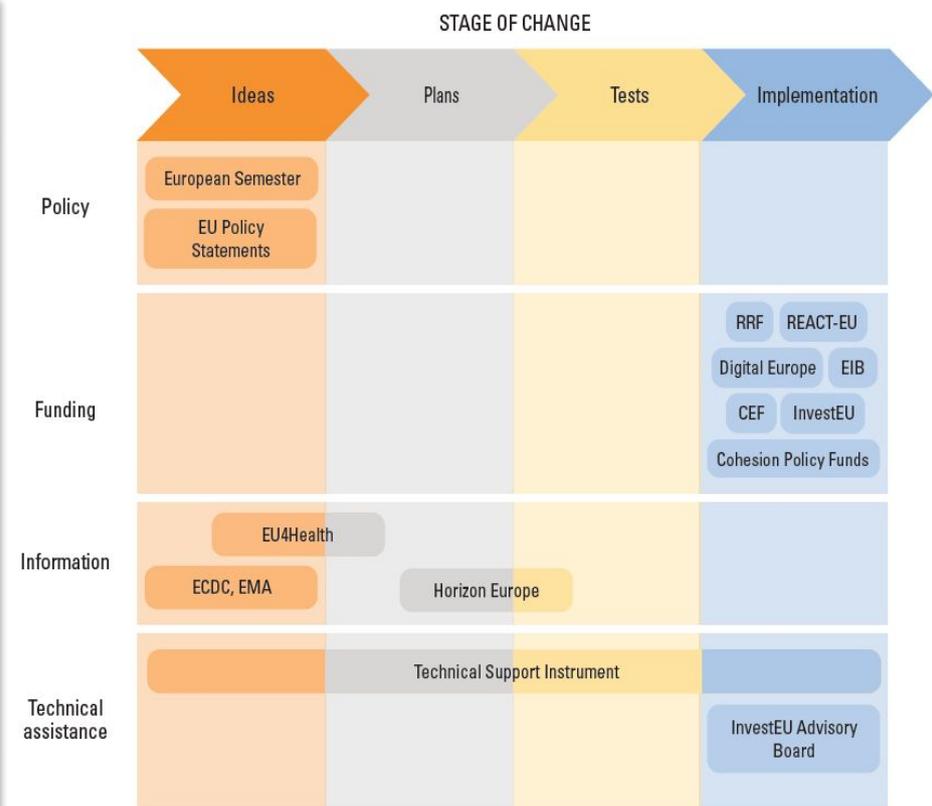
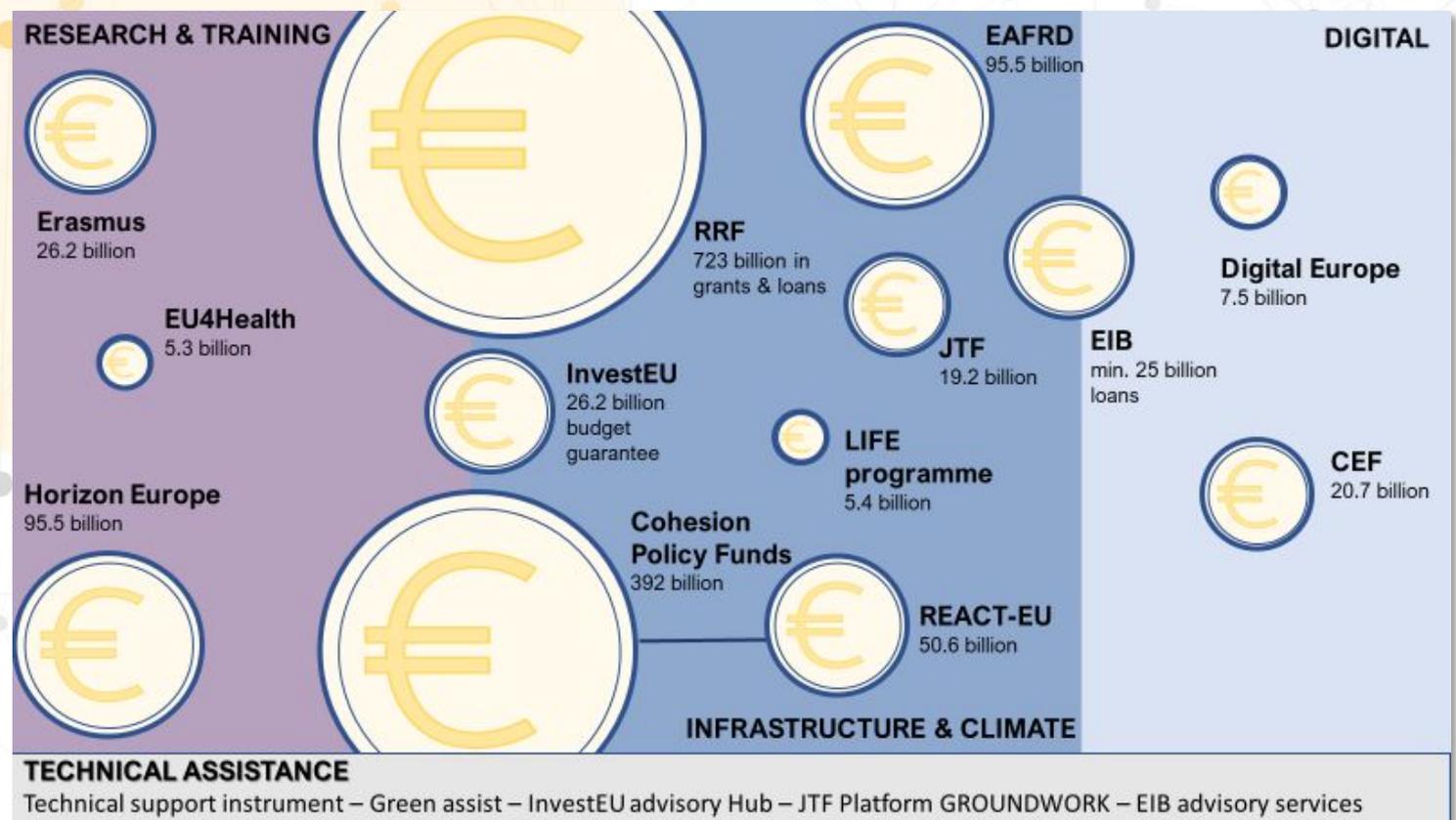
- Challenge of aligning different objectives of tools with the needs and interests of different health systems
- Challenge of matching programme timeframes, application and eligibility criteria with these needs and to translate them into project applications
- Applications are time- and resource-intensive, often requiring specialised knowledge of EU funding procedures and documentation requirements
- There is scope for making process of identifying, using and combining tools easier to navigate for policy-makers

# EU Health Resource Hub

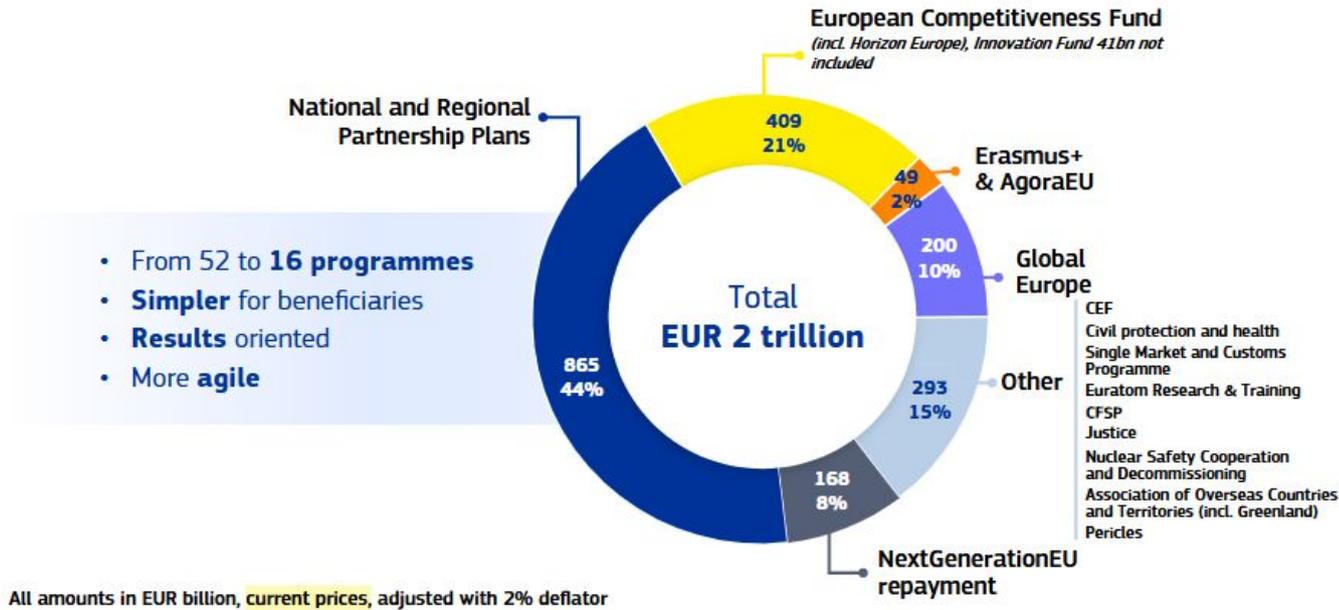
- Country pilots were used to test the concept of a hub to support Member States in their health reform efforts
- Lessons learnt from the pilot initiatives informed proposals for what a hub at EU level could look like
- Proposals envisaged both general and tailored services including:
  - Disseminating information on relevant EU programmes, networking, capacity building
  - Development of project proposals, funding identification, project optimisation and tailored support to ensure high quality applications



# Looking ahead: How will the funding landscape change?



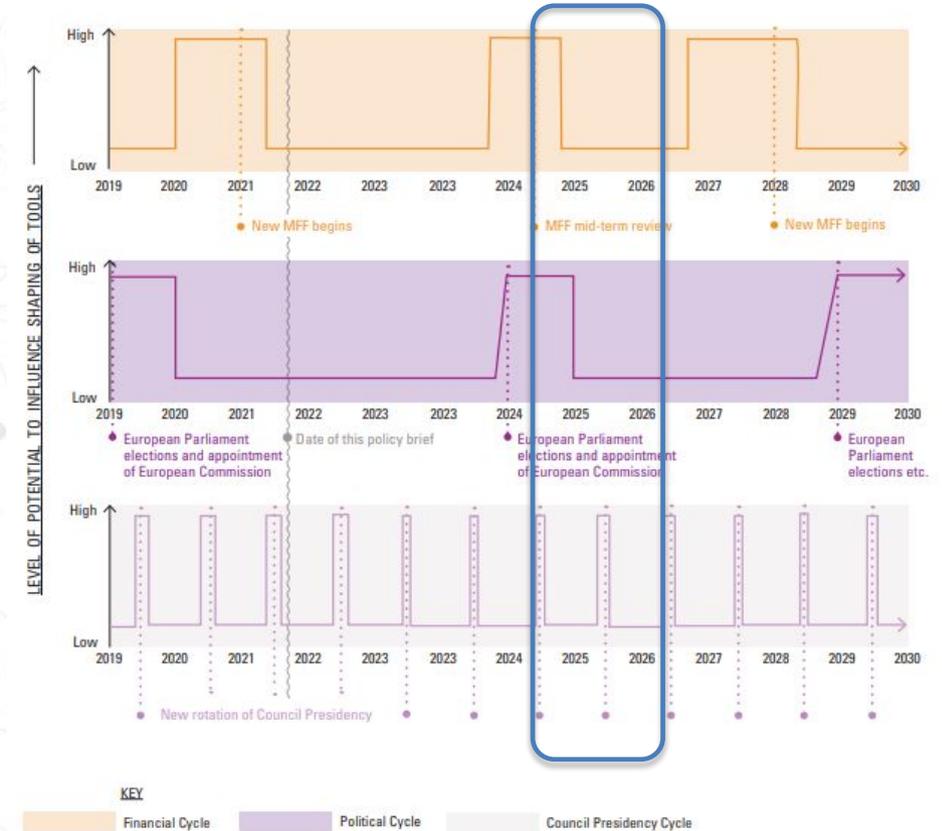
# Discussions on the new MFF and a proposed Competitiveness Fund are underway



All amounts in EUR billion, current prices, adjusted with 2% deflator

- From 52 to **16 programmes**
- **Simpler** for beneficiaries
- **Results oriented**
- **More agile**

Figure 4: The relationship between different EU institutional cycles over time



# Early considerations for the new MFF

- Changes may have important implications for health systems, but extent is difficult to foresee as:
  - Different funding instruments tend to fund different types of initiatives along the stages of change (e.g., EU4Health: evidence for action vs. ERDF: infrastructure)
  - There are important differences in budgetary size and other characteristics (e.g., RRF and Cohesion Policy Funds offer comparatively larger share of funding for health)
  - Health will be entirely channeled through other programmes – but a large proportion of the funding for health is already offered by funding instruments whose primary objective is not health
- Funding instruments may substantially change – but the expertise and capacity needed to use them may not
- Proposals focus on simplifying and streamlining processes – but how will access to funds work in practice?

# Thank you



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