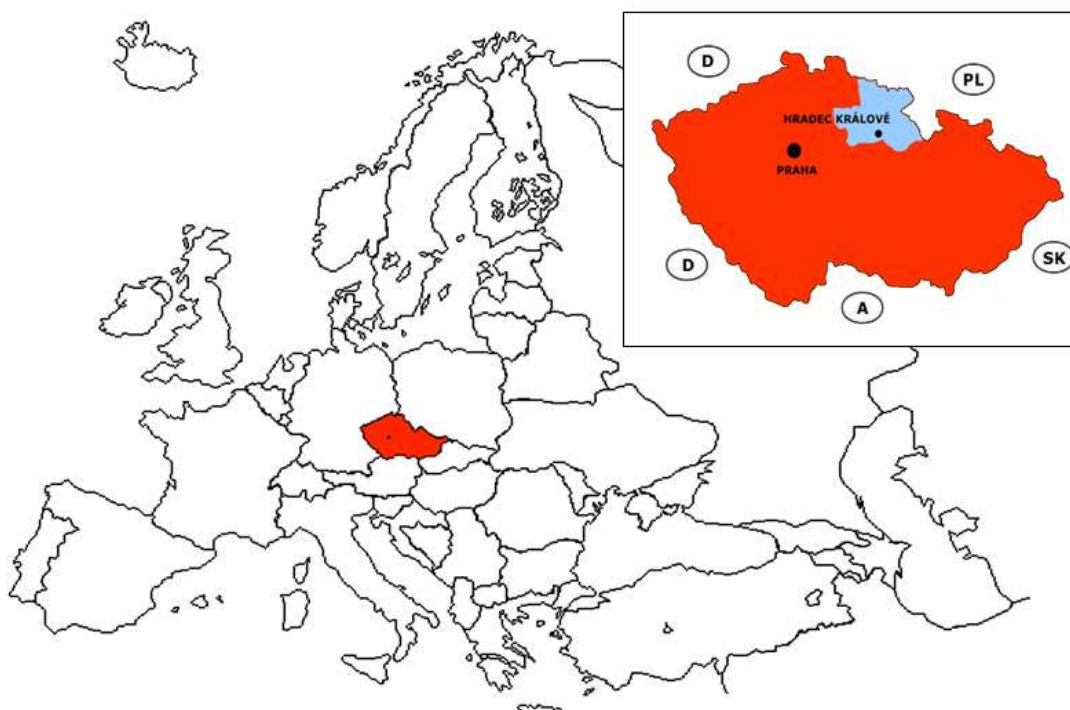




STRUCTURAL FUNDS REVIEW

HRADEC KRALOVE REGION



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HRADEC KRÁLOVÉ REGION, CZECH REPUBLIC

BASIC INFORMATION:

Area	4,758 km ²
Population	Circa 550 000
Seat of the region	Hradec Králové
Number of municipalities	448
President of the region	Lubomír Franc

The Region of Hradec Králové is situated in north-eastern part of Bohemia. With an area 4,758 square kilometres and a population about 550 000 of inhabitants it belongs among the smaller regions of the Czech Republic. In the north it borders with the Liberec Region, to the west with the Central Bohemia region and to the south with the Pardubice Region. The part of its northern and eastern border is as well the state frontier with the Polish republic. The border of region accounts for more than one-third of the border with Poland in the length of about 208 km.

With the neighbouring Liberec and Pardubice Region creates the cohesion region North-East, which is one of the biggest areas in the country by area and by number of population.

Regional capital Hradec Kralove is from the Prague (capital city of the Czech Republic) distanced 112 km.

The region can be characterized as agricultural and industrial with highly developed services.

KEY ECONOMIC DATA:

Average of monthly salary in the region is 21 028 CZK (I.Q. 2012), circa 845 €.

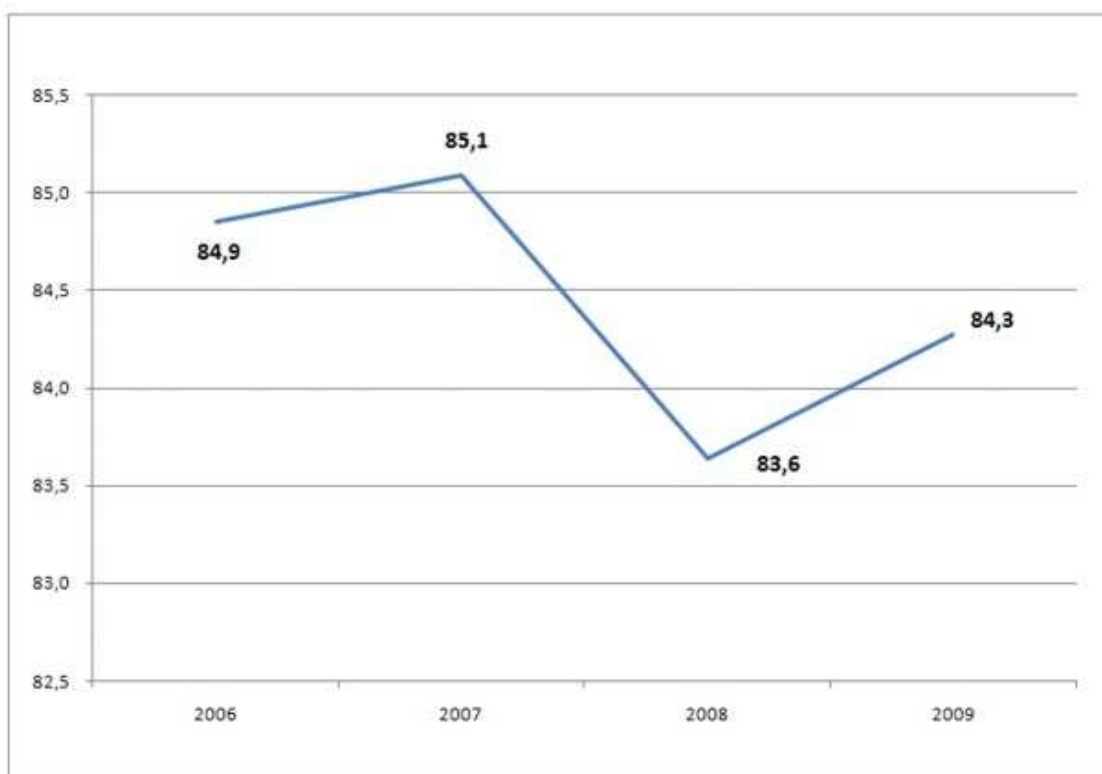
Unemployment in the region is 7, 14 % (July 2012).



Hradec Kralove Region's GDP

HRADEC KRALOVE REGION GDP	2006	2007	2008	2009
Gross Domestic Product (millions of CZK)¹	146 242	160 439	163 748	161 496
per 1 inhabitant (CZK)	266 319	291 430	295 834	291 241
per 1 inhabitant (Czech Republic = 100 %)	84,9	85,1	83,6	84,3
Development of GDP at constant prices (previous year = 100)	103,7	106,1	101,4	94,8

Development of GDP Hradec Králové per capita (GDP CR = 100%)



¹ 1 EURO = 25 CZK



Our region is still in the Objective 1 - Convergence

%																
Territory	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Czech Republic	73,2	75,1	73,0	70,3	69,6	68,3	70,2	70,3	73,1	74,9	75,8	76,9	79,8	81,0	82,2	79,6
Czech Republic without Prague	66,6	68,1	65,5	62,3	61,2	59,8	60,9	60,7	62,8	64,4	65,0	65,8	67,9	68,5	69,7	67,1
Regions – NUTS II																
Prague	123,1	128,0	129,4	131,0	134,1	133,6	142,4	145,0	153,3	156,3	159,2	161,8	170,9	175,1	175,5	172,3
Central Bohemia	64,7	65,9	64,6	64,6	65,8	65,4	66,0	66,6	68,3	70,1	69,0	72,1	74,4	74,9	73,6	71,6



South-West	70,0	72,3	69,4	66,1	64,9	63,7	64,7	64,5	67,5	69,8	70,2	71,2	71,3	68,4	71,0	68,0
Nort-West	70,6	70,4	65,9	62,0	60,1	57,3	57,3	57,9	61,0	61,5	61,5	61,5	62,9	63,0	66,8	64,0
North-East	67,0	67,9	66,9	63,6	62,7	61,9	62,5	61,7	62,1	63,3	63,8	64,1	65,8	65,5	66,7	64,0
South-East	67,1	68,9	65,9	63,2	62,1	61,1	63,5	63,2	65,8	66,2	66,9	68,2	71,2	72,8	74,6	71,5
Central Moravia	62,3	63,9	62,5	58,0	56,7	55,7	56,7	56,1	58,2	59,1	59,0	59,5	61,8	64,5	66,0	63,3
Moravia-Silesia	64,4	67,3	63,4	58,5	56,0	53,4	55,0	54,7	56,5	61,0	64,4	64,0	66,9	69,1	67,6	65,9
Regions – NUTS III																
Hradec Kralove region	68,5	70,2	69,6	66,0	65,2	64,9	65,3	63,6	65,1	66,5	65,9	65,2	67,9	68,8	71,4	68,5



HEALTH CARE IN THE REGION:

Structure of health care facilities in the region

At the end of 2010 was in the region registered 1,574 health care facilities (incl. pharmacies and dispensaries) in which employed 2,512 doctors and dentists and 5,903 paramedical personnel (paramedical workers with professional qualifications). Structure of the network of health care facilities in recent years has not changed significantly, the provision of primary care remains stable over time.

Network of institutional health care included in the region at the end of 2010 10 hospitals, 17 specialized therapeutic institutes, including spas and sanatoriums and one hospice. The number of beds in Hradec Králové region decreased by 47 hospital beds from 12/2009 to 12/2010. In the wards of hospitals were involved by the end of the year 2010 total of 571 physicians. The number of hospitalized in the region amounted to 109,000 persons (in 2009 it was 110,000 hospitalized persons). Average length of stay fell slightly from 8.1 days in 2009 to 8.0 days in 2010. In the region is one device hospice with 30 beds caring for patients that provides palliative care. Pharmaceutical services provided 162 pharmacies and 6 dispensaries of medical devices (including detached units). Increase of pharmacies stopped, but the network is not evenly divided into districts.





ACTION PLAN FOR REGIONS

STEP 1, 2: BACKGROUND ANALYSIS AND IDENTIFICATION OF PROJECTS

In the Czech Republic is in the current programming period 2007-2013 within the Structural Funds available 26 operational programs.

- A. **8 thematic operational programs** (Integrated Operational Programme, Research and Development for Innovation, Enterprise and Innovation, Education for Competitiveness, Human Resources and Employment, Environment, Transport, Technical Assistance).
- B. **7 regional operational programs** (ROP NUTS II North-East, North-West, South-East, South-West, Central Bohemia, Moravia-Silesia, Central Moravia).
- C. **9 operational programs for the European territorial cooperation:** cross-border cooperation (CR - Poland, CR - Saxony, CR – Bavaria, CR - Austria and CR – Slovakia), Transnational cooperation - Interreg IV B, Interregional cooperation - Interreg IV C; these operational programs complementing 2 network programs - ESPON 2013 and INTERACT II.
- D. **2 operational programs for Prague** - out of the cohesion regions of the Czech Republic, only the Capital City of Prague falls within the Regional Competitiveness and Employment in the period of 2007-2013; the other regions belong to the Convergence objective. There are two operational programs prepared for Prague within the Regional Competitiveness and Employment objective: OP Prague - Competitiveness and OP Prague - Adaptability.

RECEIVED FUNDING

European Regional Development Fund (ERDF)	13 709 060 617 EUR
European Social Fund (ESF)	3 774 521 428 EUR
Cohesion Fund (CF)	8 819 022 439 EUR
Total	26 302 604 484 EUR



The effective functioning of medical and other related equipment is one of the highest priorities of the Hradec Králové region². Following is a review of the current Structural Funds and specific ongoing projects in the area of health and related fields in the Hradec Králové region³.

Operational programs for health care and related fields with an impact on the region of Hradec Králové region:

²<http://www.kr-kralovehradecky.cz/cz/kraj-volene-organy/tiskove-centrum/aktuality/priority-kraje:-zdravotnictvi--doprava--zdrava-ekonomika-21985/>

Priorities of the region: health, transport, healthy economy

Accessible and quality health care and social services, modernization of transport infrastructure and the health regional economy are the main priorities of the current regional government. These priorities are included in the policy statement of the Regional Council, which was prepared 3.12.2008.

³ The health care sector and related areas are widely used by other programs and initiatives funded from EU resources and from non-European countries: Community programs, Financial Mechanisms EEA / Norway (The Czech Republic draw funds in area of reducing health inequalities), The Swiss-Czech Cooperation, Rural Development Programme of the Czech Republic for the period 2007-2013, Other programs and initiatives.



A. THEMATIC OPERATIONAL PROGRAMS

1. Integrated Operational Programme (IOP)

Integrated Operational Programme is an important potential source of funding for health. Large part of the funds of the Integrated Operational Programme is determined to care for people's health (31,5 %). Areas of intervention for health care are concentrated in priority Axis 3 - Improving the quality and accessibility of public services.

Area of support 3.1 - Services in the field of social integration: Services in the field of social integration can be used as the transformation of residential social services in social services, which allow the user to remain in its natural environment.

Area of support 3.2 - Services in the field of public health: Services in the field of public health are very essential area of support. The aim of this intervention is to achieve an adequate level of modernization and quality of technical facilities and instrumentation (medical devices) for maintaining and improving the standards of quality of health care, standards of safety run and health of persons in the health care system targeted to areas with the worst levels of quality indicators and success of care in the country, compared with the EU.

Projects of Faculty Hospital of Hradec Kralove

- **Modernization and renewal of equipment centres Comprehensive Cancer Care Faculty Hospital in Hradec Kralove** (*The project aims to improve the quality of radiation treatment, diagnosis, using visualization technology, invasive procedures, treatment of cancer patients and the safety of patients and staff*).
- **Modernization and renewal of equipment Traumatology centre of Faculty Hospital in Hradec Kralove** (*The project aims to increase the level of standard equipment Traumatology Centre for Adult and Pediatric Trauma Centre. The output of the project is the renovation and modernization of surgical and diagnostic technology modernization of resuscitation beds for children and adult. The benefits of the project will improve the quality of facilities and the improvement of the conditions for the provision of specialized care for patients with serious injuries, which are often brought to the Traumatology Centre in the state of emergency*).
- **Modernization of Faculty Hospital in Hradec Kralove in the prevention of nosocomial infections** (*The object of the project is the creation more effective prevention of nosocomial*



infections in the Faculty Hospital in Hradec Kralove, provider of highly specialized medical care most endangered populations, there are centres, such as perinatal, traumatology, oncology).

- **Modernization of Faculty Hospital in Hradec Kralove in the prevention of nosocomial infections 2** *(The object of the project is innovation system for the prevention of nosocomial infections in process of sterilization and the unification of logistics systems registers and circulation tools for central sterilization and sterilization centre neurosurgical clinics, including the replacement of the central tools in the department of central operating rooms and sterilization and neurosurgical clinics).*
- **Modernization of Faculty Hospital in Hradec Kralove in the prevention of nosocomial infections 3** *(The project is building on previous projects to maintain and improve the prevention of nosocomial infections in the process of sterilization, disinfection and safe storage of endoscopic and surgical tools, rapid diagnosis and care of hospital laundry).*
- **Modernization and reconstruction of complex instrumentation Cerebrovascular centre of Faculty Hospital in Hradec Kralove** *(The project is aimed at the modernization and renewal of equipment Comprehensive Cerebrovascular Centre of Faculty Hospital in Hradec Králové. The project mainly solves the modernization and renewal of morally and physically obsolete currently used medical equipment or technology. New technologies provide better results, but also in most cases reduce the burden of patients and medical staff).*
- **Modernization of rehabilitation at the Faculty Hospital in Hradec Kralove** *(The aim of the project is to create a program to improve the quality of comprehensive rehabilitation treatment of patients through the modernization of diagnostic and therapeutic equipment. It is the modernization and expansion of technical equipment for the application of physical therapy treatments, including hydrotherapy, kinesiology, diagnostic equipment and therapeutic devices for the analysis of walking and analysis of other physical activities. The process is closely related to medical rehabilitation facilities and adjustable patient beds, or other medical aids, such as shower beds or weighing chair).*
- **Modernization of rehabilitation at the Faculty Hospital in Hradec Kralove 2** *(The project is developing a previously defined priorities for reconstruction and modernization of Faculty Hospital in HK. The project reflects the 3 basic points concerning the modern concept of*



rehabilitation - restoration and addition of obsolete equipment, extensions rehabilitation equipment for patients with stroke, supplement the system of modern rehabilitation practices associated with robotic rehabilitation).

- **Quality management and cost optimization in the Faculty Hospital in Hradec Kralove - Phase I** (The project is a set of activities to optimize costs and improve patient care. The main activities are audit process management, system expansion of MUSE and PACS system, software integration, human resources and the purchase and installation of communications equipment for patients. The global objective of the project is to use currently available software tools and communication technologies to optimize the effectiveness of selected processes that have a significant impact on operation and the quality of patient care).
- **Modernization and renewal of equipment comprehensive cardiovascular centre of Faculty Hospital** (The project is focused on modernization and renewal of equipment comprehensive cardiovascular centre (CCC). Modernization and renewal will ensure the maintenance and increase of standard amenities of the CCC and thus improve the conditions for the provision of care in the Faculty Hospital. The main reason of this project is the obsolescence of used medical devices and technologies, both age and moral, which could compromise the provision of quality care for the target group of patients).
- **Modernization of laundry system at Faculty Hospital in Hradec Kralove** (The project is aimed on reducing the risk of nosocomial infections by purchasing technological laundries in operation, which would be better for the textiles and after multiple use and repeated washing).
- **Modernization of data networks** (The project aims to upgrade the data network in order to achieve higher performance and security of electronic transmission of data, because the current state of the data network seems risky).

Projects of Hradec Kralove region

- **Operations Centre of Emergency Medical Services of Hradec Kralove region** (The project will be set up and equipped new Hradec Králové regional medical operations centre



and will be acquired equipment for outbound stations and ambulances, with the aim of improving the provision of assistance to citizens).

- **Transformation of Colorful houses Hajnice - buy and reconstruction an object in Náchod** (*In the process of transformation is the main aim to build new homes and facilities that service users have the opportunity to live a life comparable with the life same-age peers).*
- **Transformation USP for disabled in Horice** (*The project focuses on the transformation of residential social services, which enable users to classify and remain in their natural environment, and thus to actively participate in society).*

Projects of regional hospitals

- **Instrumentation -IC Trutnov Regional Hospital** (*The project objective is to improve the quality and availability of care for patients with stroke in the area, which is defined territory impact. The realization of this project will be achieved by the standard instrumentation that favourably affects ensure cerebrovascular care).*

Area of support 3.4 - Services in the field of security, prevention and risk management: Services in the field of security, prevention and risk management such as building adequate infrastructure for training and increasing operability of the Integrated Rescue System (IRS), which is an important component of emergency medical service, as well as the technological equipment of all IRS components, building an information network system linking emergency systems in the Czech Republic with the centres in EU and enable sharing of data and coordination of activities in the event of threats to health and life. Implementation of the results to the IRS is fully consistent with the need to increase the intensity of use of innovation and new information and communication technologies.

The managing authorities and intermediate bodies: Ministry for Regional Development of the Czech Republic - Department of Operational Program Management.



Intermediate Body for the area of support 3.1 is the Ministry of Labour and Social Affairs, for the area of support 3.2 is the Ministry of Health⁴, for the area of support 3.4 is the Ministry of the Interior.

European funding source: European Fund for Regional Development.

Financial allocation: 1 582.4 million €

Reducing of health inequalities:

Integrated Operational Program is focused on the acquisition and modernization of medical instrumentation, improve the quality of technical support of medical equipment, quality management and cost optimization, etc. The main beneficiaries of subsidies are particularly large medical facilities (in the Hradec Kralove Region – Faculty Hospital Hradec Kralove). There are certain inequalities of medical equipment and technology in coverage of region.



⁴ The intermediate body is a public or private entity, which acts in responsibility of the governing bodies or carry out on their behalf activities of the beneficiaries. In practice, becomes a partner of the proposers of the project applications within a specific operational program (especially on the selection and subsequent implementation of the project). Intermediate body can decide about priorities and project financing - in accordance with the implementing document can decide about financial limits for projects, the length of the project implementation, etc.



Example of the project: **Modernization of Faculty Hospital Hradec Kralove in the prevention of nosocomial infections.**

The project is the creation of a more effective prevention of nosocomial infections in the University Hospital in Hradec Kralove, a provider of highly specialized medical care most endangered populations. There are established training centres, such as perinatal, trauma or oncology. Seriously ill and polymorbid patients undergo lot of diagnostic and therapeutic procedures in the operating theatres. Any invasive procedure or non-physiological input increases the risk of hospital infections. The primary requirement is compliance with the principles of sterility, asepsis and antisepsis. The project includes the renovation and retrofitting of sterilizing and cleaning technology. This modernization will have a significant impact on the efficiency and improve the prevention of nosocomial infections in areas related to cleaning and sterilization of instruments, laundering and sterilization of containers and galoshes. The entire project is fully implemented in the context of internal long-term policies for the prevention of nosocomial infections and the related long-term improvements of quality and safety care at the Hradec Kralove Faculty Hospital.

Beneficiary: Hradec Kralove Faculty Hospital

EU subsidy	21 250 000 CZK (850 000 EUR)
Public sources of Czech Republic (CR)	3 750 000 CZK (150 000 EUR)
Total budget	<u>25 000 000 CZK (1 000 000 EUR)</u>

2. Operational Programme Research and Development for Innovation (OP RDI)

Operational Programme Research and Development for Innovation is aimed at enhancing the competitiveness of the Czech Republic through the better of conditions setting for the existence and impact of research, development and pro-innovation centres, universities, etc. The necessity is to increase the capacity of existing centres and formation of new institutions in the regions of the Czech Republic, as well as faster transfer of research results into practice, industry and market. The program is not focused on e-Health.



The managing authorities and intermediate bodies: Ministry of Education, Youth and Sports, Department of Management of Structural Funds.

European funding source: European Fund for Regional Development.

Financial allocation: 2,070.68 million €

Reducing of health inequalities:

Subsidies focused on research, development, innovation, technology transfer, etc. are mostly directed to the large and economically powerful cities and agglomerations (Prague, Brno, Ostrava), where is the appropriate personnel, financial, etc. potential for the implementation of these projects. In the Hradec Kralove region is this program due to the above reasons used limited. In that area leads to inequalities in the use of subsidies at the national level.

Example of the project: **Biomedical Technology Transfer Centre HK**

Biomedical Technology Transfer Centre in Hradec Kralove (CTBT HK) is a regional project of significant research and educational organizations in region – Hradec Kralove Faculty Hospital (location of the project), University of Hradec Kralove, Faculty of Military Health Sciences, University of Defence in Brno. Workers of CTBT HK are responsible for monitoring of scientific activity and intense search results of research. All these activities will be conducted in cooperation with the “Scouts of scientists”, who works at various departments and clinics of the three partner institutions. The challenge for CTBT HK is used a great biomedical potential of scientific and research institutions in Hradec Kralove region, active searching of know-how, contacts with commercial entities, research institutions and the commercialization of scientific results.

Beneficiary: Hradec Kralove Faculty Hospital

EU subsidy	20 966 865 CZK (838 675 EUR)
Public sources of CR	3 700 035 CZK (148 000 EUR)
Private sources	1 627 500 CZK (65 100 EUR)
Total budget	26 294 400 CZK (1 051 775 EUR)



3. Operational Programme Enterprise and Innovation (OPEI)

Within the framework of the Operational Programme Enterprise and Innovations relates the health sector indirectly. It is an opportunity to draw funds for business development services, such as marketing strategies for healthcare companies, etc.

Areas of intervention for health care are related in the following axis:

Priority Axis 4 – for example: protection of intellectual property rights, increasing the technical and utility value of products, technologies and services, the introduction of new methods of organizing business processes and cooperation with companies and public institutions, the creation or expansion of a development centre focused on research, development and innovation of products and technologies, etc.

Priority Axis 5 – for example: support the creation and development of enterprises, scientific research, education and other support institutions, to support young Czech research institutions and enterprises into international technology platforms, establishment and development of business



incubators and innovation centres (BIC, PIC, etc.) to operate an incubator, infrastructure for education and human resources development business, preparation of business zones, conversion of brownfield into a business zone, etc.

The managing authorities and intermediate bodies: Ministry of Industry and Trade.

European funding source: European Fund for Regional Development.

Financial allocation: 3.04 billion €

Reducing of health inequalities:

Operational Program Enterprise and Innovation has no direct effect on the elimination of health inequalities. The potential impact depends on the level of business activity and the impact of project activities on individual agglomerations and regions.

Example of the Project: New Products for Health

Holzbecher Company is a family business with a long tradition in the bleaching and dyeing yarns. The company has modern production facilities and infrastructure. The company cooperates with leading Czech and foreign research institutions in the development of medical textiles and specialty chemicals. The result was a design consultancy product, organizational and process innovation in the company, drafting development program focusing on biocompatible materials. The project effectively supported the creation of a new business plan company with a focus on health care and its outcomes are being accomplished.

Beneficiary: Holzbecher Company

EU subsidy	127 500 CZK (5 100 EUR)
Public sources of CR	22 500 CZK (900 EUR)
Private sources	150 000 CZK (6 000 EUR)
<u>Total budget</u>	<u>300 000 CZK (12 000 EUR)</u>



4. Operational Programme Education for Competitiveness

Operational Programme Education for Competitiveness focuses on improving the quality of education in the whole range, at the level of primary and secondary schools and universities. These institutions are supported in active scientific research. Level of education and experience is enhanced by the pedagogues and researchers. Program is focused on medical educational institutions and other entities in the area of health care and other related areas.

Program distinguishes between two types of projects:

- Individual projects - projects of regional or supra-regional character, shall be submitted directly to the Managing Authority (Ministry of Education).
- Global Grant - scheme for the allocation of funds for the implementation of grant projects, the smaller-scale projects are presented to intermediary organizations - the regional authority.

Global grants of Hradec Kralove region

Priority Axis 1 - Initial education

Area of support 1.1 - Improving quality in education

Area of support 1.2 - Equal opportunities for children and pupils, including children and pupils with special educational needs

Area of support 1.3 - Other education for staff at schools and school facilities

Priority Axis 3 - Further Education

Area of support 3.2 - Support of further education



In all these areas of support are implemented projects with an impact on health care in the Hradec Kralove region (the place of project implementation is only the Hradec Kralove region).

The managing authorities and intermediate bodies: Ministry of Education, Youth and Sports - Section of operational programs. Intermediate body for global grants are competent regional authorities.

European funding Source: European Social Fund

Financial allocation: 1.83 billion €

Reducing of health inequalities:

The implementation of individual projects and global grants for individual regions were allocated a sufficient level of funding, but many of these funds are intended for projects that their overall quality, contribute to improving education at both the state and the regions. For this is the Czech Republic and has been repeatedly criticized by the European institutions, the implementation of some controversial projects with very high budgets had already been suspended. E.g. absorption capacity and need of support 1.2 - Equal opportunities for children and pupils, including children and pupils with special educational needs is still high, therefore this allocation should be far higher, at the expense of support - 3.2 - Support of further education (implementation frequently recurring activities with small impacts and outputs). Yet the OP managed to implement several quality projects that reduce inequalities in health.





Example of the project: **Chirophonetics help children in the age 3-9 years to prevent learning disability and behavioral problems.**

The project is to enable rapid cooperation between the parents, teachers and special education teachers considering the increasing number of children with speech defects and other defects (generally delayed psychomotor development). Direct and immediate help by special educators in kindergarten facilitate the child, parents and teachers operational approach to the problems of the child. Selected children are individually 1 week therapeutically guided. The base is chirophonetics treatment, supplemented by special pedagogical activities. Condition for the inclusion of children in to the project is that parents will work with children at home. Parents move from passive to active position. This leads to a conscious approach in the education of their child. In the Czech Republic the treatment method is little known, but very interesting and effective. The positive outcomes of the project are becoming interested in many other subjects.

Beneficiary: Kindergarten in Lázně Bělohrad

EU subsidy	623 753 CZK (24 950 EUR)
Public sources of CR	110 074 CZK (4 403 EUR)
Total budget	<u>733 827 CZK (29 353 EUR)</u>

5. Operational Programme Human Resources and Employment

Operational Programme Human Resources and Employment is focused on increasing the employment in the Czech Republic and on the improvement and development of human resources through various forms of training and education. Program can draw funds on education of health professionals.

One of the projects is focused on deepening education of doctors and non-doctors. The total amount of the event, which is run by the Institute of Postgraduate Medical Education, is almost 723 million CZK and should ensure training for 38 thousand of health professionals.



Health-related areas are mainly in the Priority Axis 1 - Adaptability, area of support 1.1 - Increasing the adaptability of employee and competitiveness of enterprises.

The managing authorities and intermediate bodies: Ministry of Labour and Social Affairs - Department for ESF Management.

European funding Source: European Social Fund

Financial allocation: 11.84 billion €

Reducing of health inequalities:

Program is favourable to reduce health inequalities. It leads to the elimination of inequalities to education and to find suitable employment for handicapped citizens at the regional or national level.





Example of the project: **Comprehensive program to support the employment of people with visual impairments in region**

The project is focused on the system of comprehensive support to people with visual disabilities, seeking employment. Combines have already successfully tested tools, along with other new activities. The project also includes support for employers including through motivational and educational programs that seek to disprove the common concerns and resulting reluctance to employ people with disabilities. These barriers result among other things from the low level of awareness and fear of increased costs. The project creates conditions for professional and personal development of people with disabilities in order to help overcome the major obstacles in the labor market. Activities offer the opportunity to improve the skills, job readiness, but will also focus on facilitating the transition of people with lower adaptability and confidence through training employment.

Beneficiary: TyfloCentrum Hradec Kralove - charitable organization

EU subsidy	3 717 046 CZK (148 682 EUR)
Public sources of CR	655 949 CZK (26 238 EUR)
Total budget	4 372 995 CZK (174 920 EUR)

6. Operational Programme Environment

Operational Programme Environment with health care related only indirectly.

The priority axis 3 "Sustainable use of energy" offers improvement of thermo-technical characteristics of medical and health-related objects, it is possible to realize a replacement panels (windows, doors), insulation cladding, or secure the ecological and economical heating of the buildings. It is possible to realize the issues regarding of medical waste.

The managing authorities and intermediate bodies: Ministry of Environment. Intermediate body is the State Environmental Fund.



European funding source: European Regional Development Fund and Cohesion Fund

Financial allocation: 4.92 billion €

Reducing of health inequalities:

Program has no direct effect on reducing health inequalities, but e.g. thermal insulation is related to the quality of housing, people can live in a good environment and better quality.

Example of the project: **Thermal insulation of buildings within the district hospital Trutnov**

In the main building (east and south wing) and in the Department of internal medicine of Trutnov Hospital were made arrangements to reduce energy intensity. In the Department of internal medicine was made insulation shell structures, roof insulation and replacing windows and doors.

Beneficiary: Hradec Kralove Region

EU subsidy	13 481 492 CZK (539 260 EUR)
Public sources of CR	8 987 661 CZK (359 506 EUR)
Private sources	8 730 847 Kč (349 234 EUR)
<u>Total budget</u>	<u>31 200 000 CZK (1 248 000 EUR)</u>





7. Operational Programme Transport

Operational Programme Transport with health care related only indirectly.

Examples of typical activities that can be financed within the framework of health: repaired communication, especially in less accessible peripheral mountain areas can contribute to faster intervention emergency medical services, etc.

The managing authorities and intermediate bodies: Ministry of Transport - Department for EU funds.

European funding source: European Regional Development Fund and Cohesion Fund

Financial allocation: 5.77 billion €

Reducing of health inequalities:

Particularly in marginal mountain areas eliminates the access to health care (new roads/communications reduce the arrival time of emergency medical services, etc.). In the border area is not good accessibility (bus, train timetables), so doctors do not have the finances and can't support the practice.





Example of the project: Road I/14 Vamberk – south relocation

The main aim of the project was the construction of the southern bypass of Vamberk in the foothills of the Eagle Mountains border. Relocation of road length is 1,700 km. Part of the project was also construction of the bridge over the water meadow Zdobnice in length 527 m, the bridge reconstruction in Vamberk and underground utilities working. Crossroads was designed as a ring with four rays. The southern bypass speed transport links and vehicles of emergency in hilly terrain in the border region.

Beneficiary: Road and Motorway Directorate of the Czech Republic

EU subsidy	387 558 857 Kč (15 502 355 EUR)
Public sources of Czech Republic (CR)	101 633 082 Kč (4 065 323 EUR)
Total budget	489 191 939 Kč (19 567 678 EUR)

B. REGIONAL OPERATIONAL PROGRAM

8. Regional Operational Programme NUTS II North-East

The Regional Operational Program NUTS II North-East is intended for the cohesion region North-East consisting of the regions of Liberec, Hradec Kralove and Pardubice. It is focused on improvement of transport accessibility and on interconnection of the region, including the modernization of the means of public transport, support of infrastructure as well as tourist trade service development, preparation of smaller business premises and buildings and improvement of living conditions in municipalities and in the countryside, in particular by means of improving the quality of education, social and health infrastructure.

Priority Axis 2 - Development of urban and rural areas

In the area of health and related health education is intended in particular priority axis 2, which focuses on the development of urban and rural areas. All areas of the priority axis 2 are concentrated on restore parts of cities and infrastructure in education, training, health and social affairs. Particularly it may be the construction of new and modernization of existing health and educational



facilities, acquisition of new medical devices and equipment, support of technical equipment of schools and facilities necessary for teaching etc.

Priority Axis 3 - Tourism

Area of support 3.1 – Development of basic infrastructure and associated activities in the field of tourism. Within this area is to be implemented construction of a convalescent facilities and spa resorts.

Priority Axis 4 - Development of business environment

Area of support 4.2 - Support for the development of cooperation between companies with high schools and vocational schools, other educational institutions and regional offices, development of innovative activities in the region. Specifically, for example, investments in the improvement of material and technical equipment of medical schools, or companies that are designed to gain practical knowledge and skills in the field of health and other related areas.

The managing authorities and intermediate bodies: Regional Council of North-East Cohesion Region

European funding source: European Fund for Regional Development.

Financial allocation: 656.46 million €

Reducing of health inequalities:

Program contributes to the reduction of health inequalities. In the region is implemented number of beneficial projects, some activities are involved even the smallest villages, which are related to improving lifestyles (see below the project Adaptation of health centre in Smidary). But on the other hand in some projects is controversial the share to eliminate inequality - see below the project Spa Resort Tree of Life (it is one of the top spa resorts in region NUTS II, public services are provided for a high fee and that's why the resort is not available for the socially weaker groups).



Example of the project: **Adaptation of a health centre in Smidary**

The adaptation of health centres were reduced costs of operation public health centre building in Smidary. As well were improved the environment for patients and nursing staff. Medical care uses in Smidary more than 3,000 people.

Beneficiary: Municipality of Smidary

EU subsidy	11 694 426,20 CZK (467 777 EUR)
Public sources of CR	1 031 861,13 CZK (41 274 EUR)
Private sources	2 663 833,40 CZK (106 553 EUR)
Total budget	15 390 120,73 CZK (615 604 EUR)





Example of the project: **Centre without barriers in Nova Paka**

The aim of the project is the reconstruction of the building in the area of the Centre Monastery (in the area of brownfields) to provide comprehensive social services to people with disabilities and seniors. The project aims to increase the capacity of the existing centre of the civic association Life without Barriers in Nova Paka, i.e. the expansion of existing services, creating new forms of partnership and meet the increasing demand for social services in the region. Part of the project will offer additional related educational and recreational activities for people with disabilities and people suffering from social exclusion (mothers with children, elderly).

For coordination is responsible beneficiary, i.e., Life Without Barriers, Nova Paka. The project also involves 3 entities: Hradec Kralove Region, Municipality of Nova Paka and Foundation Good Work of Sisters St. Karel Boromejský in Prague. These 3 entities provided financial support. The health sector has no involved in the project, it is only a social project. With the involvement of the health sector is being considered for the upcoming follow-up project (reconstruction of the adjacent monastery for health and social purposes). Beneficiary has submitted a monitoring report on the sustainability of the project, planned objectives were fully met, the reconstructed object is 100% filled (occupied) by clients and all scheduled activities are implemented.

Beneficiary: Život bez barrier (Life without Barriers), Nová Paka – civic association

EU subsidy	25 450 755,07 CZK (1 018 030 EUR)
Public sources of CR	2 245 654,86 CZK (89 826 EUR)
Private sources	2 245 654,87 CZK (89 826 EUR)
Total budget	<u>29 942 064,80 CZK (1 197 682 EUR)</u>





Example of the project: **Lázně Bělohrad - Spa Resort Tree of Life**

The main aim of the project was the construction of the Spa Resort Tree of Life, which serves as the basic infrastructure and facilities services for spa tourism.

The intention of the project implementer was built new infrastructure, to reflect the requirements and current trends in modern society, and in accordance with the strategic and conceptual documents. To offer domestic and foreign tourists new capacity through expansion of infrastructure for tourism and spa along with it to expand and improve the range of provided services.

Beneficiary: Lázně Bělohrad a.s.

EU subsidy	135 471 733,67 CZK (5 418 870 EUR)
Public sources of CR	23 906 776,53 CZK (956 271 EUR)
Private sources	159 378 510,20 CZK (6 375 140 EUR)
Total budget	<u>318 757 020,40 CZK (12 750 281 EUR)</u>





C. OPERATIONAL PROGRAMS FOR THE EUROPEAN TERRITORIAL COOPERATION

9. Operational Programme Cross-Border Cooperation Czech Republic-Poland 2007-2013

Program represents an opportunity for the development of the Czech-Polish border region due to the wide range of individual areas and also due to high financial allocation. Emphasis is placed on the actual boundary impacts and the elements of bringing people and institutions closer. In the field of health care are appropriated following priorities:

Priority Axis 1 - Enhancing accessibility, environmental protection and risk prevention

Area of support 1.3 - Risk prevention is suitable for health and education, for example the promoted activity "Development of emergency systems."

Priority Axis 2 - Support the development of the business environment and tourism

Area of support 2.1 - Development of business environment is particularly suitable for the area of medical research and education. The supported projects are: linking research with business activities, the creation and development of a network of cooperation between the business sector and research and development institutions.

Area of support 2.3 - The cooperation in the field of education is directly determined by the area of medical education. For example the promoted activity "Supporting the cooperation in education, training and lifelong learning, including the improvement of language knowledge, skills and professional competences."

Priority Axis 3 - Promoting cooperation between local communities

Area of support 3.1 - Territorial cooperation of public institutions is suitable for health and medical education - cooperation between providers of public services, sharing of experiences, good practices.

Area of support 3.3 - Micro Fund is intended to implement a wide range of smaller and non-capital medical and educational projects.

The managing authorities and intermediate bodies: Ministry for Regional Development of the Czech Republic; in Poland, the activities connected with realization of this program are arranged by the Ministry of Regional Development of Poland as the National Authority.



European funding source: European Fund for Regional Development.

Financial allocation: EUR 219, 46 million

Reducing of health inequalities:

Program contributes to reducing of health inequalities, at the level of the two neighbouring states (best transfers of knowledge, experiences, technology as well as investment between the two countries), but also at the border area – for the Czech-Polish border area is allocated amount of funds, there is a gradual elimination of health inequalities between the border areas and the central parts of both countries. The Program has a big success, is now one of the two most successful cross-border programs in all European cross-border programs (considerable interest is among applicants from the Hradec Kralove Region).

Hradec Kralove region is also lead partner of Czech-Polish project, the output should be the creation of a European grouping of territorial cooperation (EGTC). The EGTC would be possible in the future systematically and conceptually solve health issues in the border area (common use of medical equipment, etc.), which would have been significantly eliminated health inequalities in the border region.⁵

⁵ For example: EGTC called "Cerdanya Joint Cross-Border Hospital" (Spanish-French border cooperation). EGTC has in the subtitle stated motto "Health without Borders in the Euro-region". The main activity of this group is to build a hospital that will provide services in northern Catalonia, specifically in the area of Cerdanya, the region Capcir. This area, which will have the impact of a new hospital is divided between the two countries (Spain and France), but in the past (until 1659) formed one whole. In this area there is a real need to build a new hospital, and not only because of the need for the provision of health care, but also because of the complementary effects when the new hospital will have a positive effect in reducing the negative impacts of the demographic situation (to maintain the population in the region), as well as the development of tourism, to strengthen the economy, etc. The project supports the development tools in accordance with European standards (the free movement of patients, common quality standards, etc.). The project has found wide support from regional politicians. The foundation stone of the hospital was laid at the end of 2007 and termination of hospital construction is expected in 2012.





Example of the project: **Cross-border cooperation of medical emergency services Hradec Králové and Jelenia Gora**

In the area of support 1.3 - Risk Prevention was supported cross-border project by the Medical Emergency Service Hradec Králové and Medical Emergency Service of Jelenia Góra. On the Czech side has been renovated and equipped a dilapidated building in Trutnov, where established the necessary space for two rescue crews and medical dispatching, Polish partner bought two-equipped ambulances. The project includes the implementation of joint exercises, exchange programs, language courses, etc. Project activities will significantly improve access to quality health care for patients still neglected and less accessible mountainous border region.

Beneficiary: Medical Emergency Service of Hradec Kralove region, Medical Emergency Service Jelenia Góra

EU subsidy	956 611,25 EUR
Public sources of CR	42 725 EUR
Private sources	85 450 EUR + 40 638,75 EUR
Total budget	<u>1 125 425 EUR</u>





10. Operational Program Transnational Cooperation (OP TC)

The operational program Transnational Cooperation is divided into several zones. The Czech Republic belongs to the zone of Central Europe and hence we share the OP Transnational Cooperation with Austria, Poland, a part of Germany, Hungary, Slovenia, Slovakia, a part of Italy and also a part of Ukraine as one of the non-member states. The program continue on the initiative Interreg III B CADSES implemented in the programming period 2004-2006 and therefore it is often called Interreg IV B. Non-investment projects are supported. The program focuses on cooperation between public authorities and institutions in order to exchange and transfer of experiences, especially in areas related to enabling or facilitating innovation, as well as availability of transport, increasing the attractiveness of cities and regions, etc.

The managing authorities and intermediate bodies: The managing authority of the OP TC is the Amt der Wiener Landesregierung in Austria, the National Coordinator in the Czech Republic is the Ministry for Regional Development of the CR.

European funding source: European Fund for Regional Development.

Financial allocation: EUR 37.46 million

Reducing of health inequalities:

Program contributes effectively and efficiently to eliminate health inequalities between the states of each zone (the Czech Republic - Central Europe zone).





Example of the project: **IntraMED-C2C**

In the Hradec Kralove region wasn't realized any project in health and related fields. As an example was chosen project involving the South Moravian Region - Centre for Research, Development and Innovation.

The project focuses on improving processes in health care, with a focus on linking health centres and small and medium enterprises. The aim of the project is to motivate the wearer of innovative potential to share innovative ideas and allow for the transfer of these innovative ideas to recipients of small and medium-sized businesses who are able to implement the ideas in the form of tradable commodities. Project InTraMed-C2C has promoted the development and utilization of human capital within the hospitals and has contributed to the support of small and medium enterprises. The project involves a total of 10 partners from 7 countries from the region of Central Europe - *Bayern Innovativ GmbH (GER), Centre for Research, Development and Innovation (CZ), Erlangen AG Technologie Scouting & Marketing (GER), Clusterland Upper-Austria (AT), TIS innovation park (IT), Lower Silesian Voivodeship (PL), The John Paul II Hospital (IT), Business support centre ltd. Kranj (SLO), Budapest University of Technology and Economics (HU), University of Debrecen (HU)*. Very interesting is the connection of PPP.

Beneficiary: Bayern Innovativ GmbH, GER

EU subsidy	1 803 522 EUR
Total budget	2 121 790 EUR

11. Operational Program Interregional Cooperation

The operational program Interregional Cooperation (called INTERREG IV C) is a joint one for all EU member states as well as for Norway and Switzerland. The project is focused on cooperation between public authorities and institutions with the nature of public authorities at the regional and local levels with the objective of exchanging and transmitting experiences and findings of the joint development of approaches and tools that will improve effectiveness of the regional development policy. The main areas of cooperation are the innovations and knowledge economy, the environment and the protection against risks. For example, strategic collaboration to optimize / increase the use



of new technologies environmentally friendly, collection and transfer of good practices in science parks, innovation centres, incubators or clusters, exchange information on the development of public services based on information and communication technologies, exchange best practices in training and retaining researchers etc. Program is also possible to submit projects related to health care, education and research. Financial resources of the program have not specific financial allocation (not allocated to particular states). Lead partner has responsibility for the management, communication, implementation and coordination of activities among the partners.

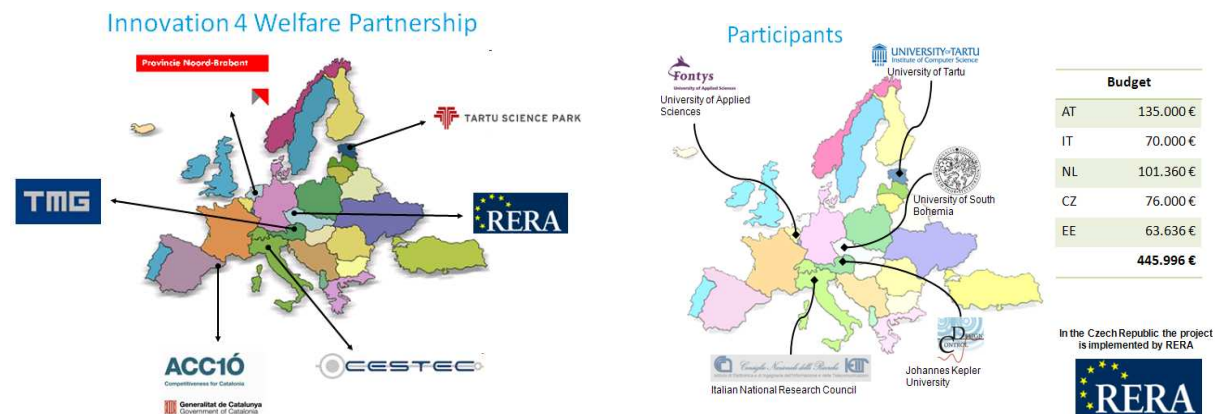
The managing authorities and intermediate bodies: the Conseil Régional Nord - Pas de Calais in France; the National Contact Point in the Czech Republic is the Ministry for Regional Development of the Czech Republic.

European funding source: European Regional Development Fund (ERDF)

Financial allocation: EUR 321.32 million

Reducing of health inequalities:

Program contributes effectively and efficiently to eliminate inequalities in health between all EU Member States (including island and outermost regions), Switzerland and Norway (partners from these two countries are co-financed with national funds).





Example of the project: Innovation for Welfare

In the Hradec Kralove region was not realized any project in health and related fields. As an example was chosen project involving RERA - Regional Development Agency of South Bohemia as a major partner for the Czech Republic. Currently were approved eight subprojects, which are represented in the other 5 partners from the region NUTS II South-West (South Bohemia and Plzeň Region).

Economic and demographic trends across Europe brings new challenges in health-related matters: existing general tendency to prioritize health and safety, a strong increase in welfare associated with lifestyle diseases and increased need for home care, especially for an aging population are the reason that health care costs rapidly rise. To solve these tasks and challenges are required innovative solutions, which must also facilitate access to health care for all population groups. The project focuses in particular on measures to better face new challenges associated just with new diseases, aging and demographic changes. The aim is to increase the effectiveness of systems in the field of health care and social services for the use of international cooperation and transfer of knowledge and experience between EU regions. The project involves regions from 6 European countries.

Scientists from the Department of Applied Physics and Technology Faculty of Education, University of South Bohemia in the subproject presented *ROBO MD* fully functional prototype of the robot, which allows continuous monitoring of selected vital signs monitored person. A fully functional prototype was unveiled on 12th of December 2011 at the Johannes Kepler Universität Linz.

Beneficiary: Catalonia - SP, Lombardy - IT, Noord-Brabant - NL, South Bohemia region– ČR (RERA a.s.), Upper Austria - AT, Tartu - ES

Total budget	445 996 EUR
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CONCLUSION:

Within the Hradec Kralove region the financial resources of the Structural Funds in the current programming period are used for direct eliminating of health inequalities to a lesser extent.

The “soft projects” or “non-investment projects” has positive impact to eliminating of health inequalities, but e.g. in the Operational Program Education for Competitiveness given the inefficient use of resources should be allocated much higher amount for eliminating of HI.

Cross-Border Cooperation Czech Republic-Poland 2007-2013 also helps to eliminating of health inequalities.

Large part supported and implemented projects that are only in "indirect" context with the elimination of HI are called “hard, or investment projects” (e.g. hospital equipment, instrumentation, insulation of buildings, etc.). The programs IOP and ROP N-E are in the area of health care and related fields designed almost exclusively for investment activities, especially in the ROP N-E was in terms of eliminating of HI implemented several controversial projects - for example, described project "Bělohrad Spa - Spa Resort Tree of Life". However, it also should be noted that due to neglected infrastructure in many areas in the Czech Republic and other countries of Central and Eastern Europe still need investment activities (medical and social reconstruction of buildings, equipment, transportation and communication links, etc.), unlike the Western and Northern Europe, where is no need for investment in this field. That corresponds to the high number of so-called hard investment projects in the Hradec Kralove region.

Most often lead European subsidies in the region to Faculty Hospital and especially to the implementation of investment activities, the Faculty Hospital in many ways far the largest medical facility in the region and one of the largest in the whole country. The hospital has own project department, that deals with the subsidies). European subsidies flow to regional health and social services and very less to the private health facilities (e.g. Sanus - sanatorium for health, beauty and fertility).

The next programming period should be focused on other inequalities in health, such as social area or transport - communication for better availability in mountainous and border areas, etc. And realize a soft non-investment activities for the elimination of health disparities (e.g., long-term problem is the inability of permanent housing for socially disadvantaged people in their own homes instead of social institutions, thanks to should be increased integration of this population group).



STEP 3: CASE STUDY

1. PROBIOTICS: JOINT RESEARCH AND HEALTH EDUCATION

<http://www.gnotobio-probiotika.cz>

<http://www.biomed.cas.cz/mbu/les>



BRIEF DESCRIPTION:

The project is implemented from August 2010 to June 2013. The project is supported by the co-financing under OP cross-border cooperation Czech Republic – Poland, area of support 2.1 - Development of business environment. The total amount of the contribution from the European Regional Development Fund is 742 292 EUR.

The objectives and scope of the project and how it contributes to reducing health inequalities. Why do you consider this example particularly promising and why did you select this project (which aspects stood out that are of interest to you)?

The main objective of the project is to establish cooperation between workplaces: Laboratories physiology, immunity and ontogeny at Institute of Microbiology of the Academy of Sciences of the Czech Republic in Nový Hrádek (Hradec Kralove region) and Laboratorium mikrobiologii lekarskej, Instytut Immunologii i Terapii Doświadczalnej, Polska Akademia Nauk, Wrocław (Institute of Immunology and Experimental Therapy, Polish Academy of Sciences, Wrocław). Both of these entities engaged in the study of the impact of probiotics on the development of inflammatory diseases.

The research part of the project activity include joint studies of selected probiotic bacteria (lactic acid bacteria and bifidobacterium) to develop the diseases of which foundation is currently associated with negative changes in the composition of intestinal microflora. These diseases include ulcerative colitis, allergies, and atherosclerosis. Joint research contributes to the understanding of the mechanism how the diseases arise and develop new therapeutic approaches. It was purchased the flow cytometry. This unique scientific instrument allows sort the individual cells on the basis of their



characteristics into separate tubes and tremendous speed (about 30,000 cells per second). This way you can in a short time to get a clean set of cells, which can then be further study to determine their characteristics, check the status of their genes and perform tests that reveal their function in the body.

The actual studies are conducted in the laboratories of the Institute of Microbiology of the Academy of Sciences CR in Novy Hradek and the Institute of Immunology and Experimental Therapy Polish Academy of Sciences in Wroclaw, and also by its other partners in a supported area. The purchased device (flow cytometry) is actively used by Czech and Polish partner.

An important part of the project is the organization of workshops, seminars and conferences in the supported area and exchanges of researchers and students. For the general public of all ages, different educational and social backgrounds is used wide awareness and prevention campaign, of which main aim is popularization of research results in the field of probiotics.

This is a unique opportunity to pass through the scientist the results to the public.

The abovementioned activities are considerable interest among the public. Joint research, internships for science researchers and students and seminars for the general public contribute to the development and competitiveness in the border area.

PROJECT ACQUISITION:

Why do you think the project was selected?

This is the first Czech-Polish scientific research project carried out in the Czech-Polish cross-border program, which is fully in compliance with the areas of support. This is an innovative project with a positive impact on its own research and general public.

The processes of getting structural funding - e.g. was there existing experience with structural funds?

What are the steps involved in submitting a proposal and getting it funded? How difficult was this?

How could this be done better? How could access to structural funding be improved?

Both applicants had experience with the subsidy issue but not with the cross-border program. The initiative came from the Czech partner, who contacted the forthcoming Polish partner. Both partners approached to the creation of project applications actively and with great enthusiasm. Lead partner several times consulted the project application at the Hradec Kralove Regional Office (regional entity



program) - in person, by telephone, electronically and the regional representative on the contrary visited laboratories in Novy Hradek to verify the conditions for project implementation. After submission of the project application was checking formal requirements and eligibility, followed by the actual evaluation process. At the meeting of the Monitoring Committee the project was selected for co-financing. The decision was followed by the signing of the grant.

PROJECT IMPLEMENTATION:

Once the project was accepted for funding, what were your experiences with respect to administering the project? Were there many conditionalities or complications? Was there an opportunity to give feedback on challenges faced to regional and national managing authorities?

No serious problems have occurred in the administration of the project. Some comments are only to small program flexibility and considerable thoroughness of inspection bodies such as unplanned changes occurred in the implementation phase of the project. It is not possible to predict and describe all project activities in advance exactly.

Examples:

- Travel allowances: was not able to realize effective and economically efficient business trip (by bus) of project team and students to Wroclaw on workplace of the partner. This activity, which naturally arose during project implementation, was not possible to include in the project activities;
- Personnel costs - some project participants worked actively and high standard in this context could also demonstrate specific outcomes, but it was not possible during the project more financially evaluate. Very low flexibility in transferring funds (personnel costs), e.g. in connection with the maternity leave;
- Purchase of equipment - for the purchase of necessary chemicals (antibodies) was required to put out competitive tendering, in this case, is not appropriate (cheapest antibodies may not be effective).

Ministry of Finance (Audit Authority - Central Harmonisation Unit) carried out control of the project, it was not find irregularities, on the contrary, it was stated that the project is implemented in all professional, quality and effectively.



COLLABORATION ACROSS SECTORS:

In the case of projects not directly managed by the health-sector, was the health sector involved? If so, at what stage did it become involved, at the outset or during implementation?

The lead partner of the project contacted the director of Faculty Hospital (Hradec Kralove) in order to common cooperation on project outcomes. To the involvement has not yet occurred, probably due to lack of capacity.

Did/how did different actors and sectors work together? If health was working in partnership with other areas how were budgetary issues handled?

Cooperation between the various actors was purposeful and positively evaluated. All activities, including budgetary issues, based on pre-defined project application.

OPPORTUNITIES AND DIFFICULTIES

Further insights and comments on opportunities and difficulties of using SF money for initiatives that can contribute to a reduction of health inequalities?

In the future programming period 2014-2020 would be suitable the higher allocation focused on what is described in this project, to the detriment of other areas (often ineffective educational activities within the OP Education for Competitiveness, etc.).

The described project is unique, the fact that results are within the project activities transferred accessible and popular form of the general public of all ages, different educational and social backgrounds of the Czech and Polish side of supported territory. At the same time are exchanged information and experiences at the level of both involved states.

The project activities among the general public is very interested in coming number of thank you letters from teachers as well as other representatives of the target group - it confirms the fact that probiotics are currently very topical subject. People are becoming more interested in what to do for your health, what foods they consume.

The media have been several reports of health problems associated with excessive application of antibiotics, but also the low quality of some foods - these foods are supplemented with dyes, preservatives, emulsifiers and other additives that may have adverse effects on the human body, especially the children. To the group of foodstuffs include dairy products (very popular in the Czech



Republic), which are supplied to the Eastern European markets mostly by foreign dairy concerns (at the expense of domestic regional production). In this area of products is information campaign very necessary – e.g. composition of dairy products is often intentionally placed by the small print, especially for children and the elderly may be the text unreadable.

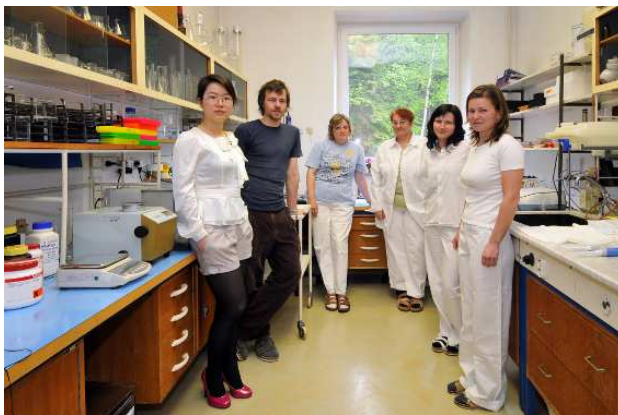
The project activity contributes to the reduction of health inequalities - the population is objectively and impartially informed of the facts, which can positively influence health. The seminars were not only about the subject of probiotics, but addressed the general principles of healthy nutrition.

UPCOMING CHANGES IN SF PROGRAMMING

Knowledge or insights regarding the initiative in light of the upcoming SF period. Is the initiative likely to receive follow-up financing? Do project holders/managers know if/think that they will be able to apply for similar initiatives under the next Programming Period? What will be the impact of the proposed changes and will they enable such actions or limit possibilities?

Both cross-border partners are preparing in the same program period the following and quite innovative project called 'Pollen and food allergies know no borders! The joint research and health education' (the expected duration of the project - from August 2013 to June 2015)

Partners have information on the exhaustively defined fields that can be financed from the European Funds in the programming period 2014-2020 (these issues are part of a package of legislative proposals for cohesion policy, published by the EC on October 6, 2011). The first thematic objective is 'Strengthening research, technological development and innovation' among other thematic objectives include 'Investing in education, skills and lifelong learning'. The EC has set the precise ratios, how the funds should be distributed. Convergence regions will have to invest half of the resources in small and medium-sized enterprises, science and research and so-called green economy. It fills all of the partner optimism for the future programming period.





2. CAFE: BISTRO WITH TWO FRIENDS

<http://www.esfcr.cz/projekty/bistro-u-dvou-pratel>

<http://www.hkcity.cz/bistro-u-dvou-pratel-hradec-kralove/>



BRIEF DESCRIPTION:

The project is implemented from 1 December 2011 to 30 November 2013. The project budget is 4 827 956.19 CZK (renovation and new construction of the building was designed by architect Helena Dařbujanova and cost about 5.5 million CZK).

The objectives and scope of the project and how it contributes to reducing health inequalities. Why do you consider this example particularly promising and why did you select this project (which aspects stood out that are of interest to you)?

The naming of the project and the cafe as well was inspired by French film, in which played Jean Reno and Gerard Depardieu and they wanted to establish a bistro with two friends. The implementer of the project is charitable trust called Jump into life, Hradec Kralove. Bistro offers 30 seats, children's play area with summer garden. Majority of workers in Bistro are with mental disabilities. Everybody wants to contribute most to the satisfaction of all customers. They prepare food for a typical French bistro - products include French bread, pancakes, waffles and more. There is also a good coffee, cocktails and homemade lemonade. Candidates may also enjoy snack delivery service to schools and businesses.

The project is aimed at creating job for 7 persons with mental disabilities like a cafeteria attendant, preparation of food, cleaning services or delivery services. The project leaders will be trained in the topic of social entrepreneurship.

Hradec Králové Regional Office supports the project. The Bistro is in the area of regional office and services are widely used by officials from office.

The target group of the project consists of adults with mild mental disabilities after leaving school and living in the region of Hradec Kralove and the surrounding area. Size of the target group is about 7 people. These are young people who want to work, are socially adaptable, able to work in a team



and to some extent independently, keeps working at least half-time work, are motivated to change your life, learn new skills and habits. These are people with mental disabilities who are at the age where they can get a lot of new information and skills. They all live in the household with their parents or legal representatives with whom the applicant is already working. Most of the parents are aware of the need to find solutions for their descendants, i.e. job security, living with assistant to ensure their safe and happy life in the time when they won't be able to take care of them.

The project has defined two basic outcomes:

1. Realization of social entrepreneurship
2. Methodology of specific work practices to individual work activities, attendant of appliances (e.g. cutting, etc.).

The methodology will be adapted in a clear and simple form for people with intellectual disabilities.

PROJECT ACQUISITION:

Why do you think the project was selected?

Bistro is a partial response and retaliation for the poor state of the labour market, in the region is a big problem for people with mental disabilities finding a job and this project to create jobs for this group of people with disabilities. Project idea was inspired from abroad, especially in western and northern Europe, where the target group is supported and involved to workflow much more. Evaluators of project plan appreciated the idea of linking the social sphere and the business sphere (social enterprise). The project team complements the professional guarantor who has experience with the operation of restaurants.

According to the opinion of the applicant the project was supported due to the fact that they received support from that Hradec Kralove Regional Office, institutions and companies that have shown interest in the products and have become customers of the Bistro.

The processes of getting structural funding - e.g. was there existing experience with structural funds?

What are the steps involved in submitting a proposal and getting it funded? How difficult was this?

How could this be done better? How could access to structural funding be improved?

Beneficiary has experience with several other projects - Return to Work (Joint Regional Operational Programme), Jump to the Europe (OP Human Resources and Employment - international



cooperation) to several other projects is involved as a partner or participant in the project activities. Currently is evaluated another future project plan submitted to the OP HRE (area of support 3.1 - Support of social integration and social services). During the preparation and implementation of the project Bistro with Two friends were and are used as much as the experiences of previous projects (especially projects Return to work and Jump to the Europe).

PROJECT IMPLEMENTATION:

Once the project was accepted for funding, what were your experiences with respect to administering the project? Were there many conditionalities or complications? Was there an opportunity to give feedback on challenges faced to regional and national managing authorities?

Beneficiary expressed satisfaction with the evaluators and civil servants from Ministry of Labour and Social Affairs in the evaluation process – Ministry was interested in the content, not just a formality.

Other experiences and observations:

1. It is not advisable to write the budget exactly and in detail, the better is only a general description. However, if any changes occur, such as the purchase of equipment, i.e. the number of pieces, etc., these changes should not be difficult to implement.
2. The feedback with the governing body is very good, also with external administrators.

COLLABORATION ACROSS SECTORS:

In the case of projects not directly managed by the health-sector, was the health sector involved? If so, at what stage did it become involved, at the outset or during implementation?

- There is a great concern of parents and legal representatives that because of the involvement the target group into the project will lose out state contribution (Czech Social Security Administration suddenly registers that the employer pays for them health and social insurance). Removing of the state contribution may this target group involved into the project, cause considerable problems.
1. The doctors are worried about legislative or legal difficulties if they allow the involvement of the target group in to the work process.
 2. Entrepreneurs versus target group – example of good practise for employers.



Did/how did different actors and sectors work together? If health was working in partnership with other areas how were budgetary issues handled?

Implementer appreciates the support of the President of the region and communication with the real estate management (realization of buildings and equipment) - during construction were allowed to design own comments and requests.

The High School in Hradec Kralove allowed during the six months before the start of the project practical training with snacks preparing.

Within the budget has not been implemented any financial partnerships. Bistro construction was fully funded by Hradec Kralove Region.

The continuation of sustainability will provide as well the Ministry of Labour and Social Affairs (contribution from the Employment office).

OPPORTUNITIES AND DIFFICULTIES

Further insights and comments on opportunities and difficulties of using SF money for initiatives that can contribute to a reduction of health inequalities?

There is an excessive bureaucracy to the exclusion of lesser interest for the project activities outputs.

UPCOMING CHANGES IN SF PROGRAMMING

Knowledge or insights regarding the initiative in light of the upcoming SF period. Is the initiative likely to receive follow-up financing? Do project holders/managers know if/think that they will be able to apply for similar initiatives under the next Programming Period? What will be the impact of the proposed changes and will they enable such actions or limit possibilities?

Not comprehensively dealt with the issue of social finance in the Czech Republic.

The main goal for the future is to ensure the target group appropriate housing and employ them - **live and employ.**





STEP 4: PROJECT PROPOSAL AND STRUCTURAL FUND PROSPECTS FOR HEALTH INEQUALITIES

1. FUTURE PROGRAMMING PERIOD 2014 - 2020

Ministry of Regional Development of the CR (specifically, the National Coordination Authority) has prepared *The general proposal focus of future EU cohesion policy after 2013 in the Czech Republic, including proposal for developing priorities for the use of EU funds after 2013*. Document approved the Czech Government its Resolution No. 650/2011 on 31 August 2011 based on the resolution of the Committee for the EU on 26.1.2011 No. 1. Committee for the EU in the resolution approved the updated Framework position of the CR for future EU cohesion policy and assigned to the Minister of Regional Development to develop (in cooperation with members of the government, and submit the proposal no later than 31.7.2011) a comprehensive proposal focus of future EU cohesion policy after 2013 in the Czech Republic, including proposals for developing priorities for the use of EU funds after 2013. The Committee also recommended to presidents of the regions to cooperate in drafting the development priorities of the Czech Republic under the relevant article of the resolution. Draft of national developing priorities was presented on the basis of summary of the macroeconomic context in the Czech Republic, carried out in accordance with the strategic documents of the EU and the Czech Republic. The proposal of priorities was discussed on different platforms with ministries, regions, cities and municipalities, social and economic partners and other partners. There was a consensus strategic focus of national development priorities.

National development priorities are without prejudice to the future direction of the operational programs or settings and details of implementation structures and processes. The existence of national development priorities don't implied the existence of an operational program. Objectives of specific priorities can be achieved by interventions of one operational program, while one operational program can serve to implement more development priorities. It is also conceivable that some priority targets will be filled more operational programs. Task of determining the orientation, number of operational programs, structure and implementation of the system was subject to further negotiations and will be modified by the Government Resolution in 2012. During the November-December 2012, the Government will discuss the document *"Basis of preparation of the Partnership Agreement for the 2014-2020 programming period - Definition of operational programs and the next steps in the preparation of the Czech Republic for the efficient use of European funds"* (this



document is also expressed by individual regions, but participants of the Equity Action project didn't comment the document). If the document approves by the government and also finds agreement with the EC, will commence its own finalization "**Agreement of the Partnership for the programming period 2014-2020**", which in the new programming period 2014-2020 will replace the National Strategic Reference Framework. By the end of March 2013 should be developed the form of OP, follow the approval process - approval of OP by the Czech Government (until the end of 2013).

Within the document **The general proposal focus of future EU cohesion policy after 2013 in the Czech Republic, including proposal for developing priorities for the use of EU funds after 2013** are defined 5 key national development priorities of the Czech Republic⁶:

⁶ Strategic objectives and priorities of the National Strategic Reference Framework in the current programming period:

I. Strategic objective: Competitive Czech Economy

The priorities of the NSRF:

- Competitive business sector
- Support for R & D capacity for innovation

II. Strategic objective: Open, flexible and cohesive society

The priorities of the NSRF:

- Education
- Increasing employment and employability
- Strengthening social cohesion
- Development of information society
- Smart Administration

III. Strategic objective: Attractive Environment

The priorities of the NSRF:

- Protecting and improving the environment
- Improving access to transport

IV. Strategic objective: Balanced Development of Territory

The priorities of the NSRF:

- Balanced Regional Development
- Development of urban areas
- Development of rural areas

National development priorities of the Czech Republic for the programming period 2014-2020 to some extent linked to the strategic objectives and priorities of the National Strategic Reference Framework and taking into account the EU2020 Strategy.



1. Increasing the competitiveness of the economy
2. The development of backbone infrastructure
3. Improving the quality and efficiency of public administration
- 4. Promoting social inclusion, the fight against poverty and the health care system⁷**
5. Integrated territorial development

These priorities have been prepared by the Ministry of Regional Development (specifically, the National Coordination Authority) on the basis of economic analysis and following discussions with relevant partners in particular sectors, regions, the Union of Towns and Municipalities, etc.

They will take into account the newly set thematic objectives (strengthening research, technological development, innovation, increase the competitiveness of small and medium enterprises, promoting adaptation to climate change, etc.), but it also continues efforts to preserve key issues of the current period, such as the promotion of tourism and support initiatives of local development and extending them to the issue of regional transport networks.

1.1 AREA OF HEALTH CARE

Within the defined five basic priorities of the Czech Republic was also established area Promoting social inclusion, the fight against poverty and the health care system. Other thematic areas, which are of the Ministry of Health recommended to support regional policy are included in the other priorities:

- Education and Human Resource Development - National development priority: Increasing the competitiveness of the economy.
- Science and research - National development priority: Increasing the competitiveness of the economy.
- Support the implementation of e-health - National development priority: Improving the quality and efficiency of public administration.

⁷ For the health and tackling of health inequalities is determined national development priority 'Promoting social inclusion, the fight against poverty and the health care system'.



- Modernisation of health infrastructure - National development priority: Integrated territorial development

The Ministry of Health currently is preparing background documents and initiates cooperation with relevant partners in the health sector (Association of Regions of the Czech Republic, particular regions, National Institute of Public Health, Universities, professional medical societies - in these societies are affiliated doctors and hospitals). Preparation for future periods within the Ministry of Health was commissioned by the Department of European Funds.

The priority is to ensure effective and coordinated use of EU funds for the modernization of the Czech healthcare system and also due to the ongoing demographic changes, which bring increased demands on health care.

Health care was included by the Czech Government in the basic five priorities and is likely that the estimated 600 billion CZK (approx. EUR 24.5 billion), which will have the CR available in the programming period 2014-2020, will go a considerable part again on projects in health care.

1.2 OTHER IMPORTANT MILESTONES IN PREPARATION OF THE PROGRAMMING PERIOD 2014-2020

- In October 2011 the European Commission published a draft Regulation for the next programming period.
- In January 2012 the Government of the Czech Republic approved 'Framework position of Czech Republic on proposals for new regulations'.
- At the regional level has been processed 'Framework position of the regions of the Czech Republic on proposals for new regulations'. In October 2011, the European Commission presented its legislative proposals for new regulations for cohesion policy for the period 2014-2020. The Czech Republic and regions responded to these suggestions by creating a common Framework position, which is in many points identical with the position adopted by the Czech Government. The document "Framework position of Czech regions on draft regulations for the period 2014-2020" had been already created (5.12. 2011) and is freely available for download.
- At EU level has been intensive discussions on the text of proposed new regulations.



- Ministry of Regional Development prepared new material on the ground of resolution by Government from 31 August 2011 No. 650 'Definition of operational programs and the next steps in the preparation of the Czech Republic for the efficient use of European funds'. It is a document which is the starting basis for the establishment of the Partnership Agreement for the programming period 2014-2020, the preparation and negotiation the government imposed to Ministry of Regional Development.
- Implementation structure for the new programming period (2014 - 2020) has not been discussed yet. Not expected to be a separate operating program for health care. By the end of March 2013 should be prepared form of individual OP. OP should be approved by the government until the end of 2013.

2. PROMOTING SOCIAL INCLUSION, THE FIGHT AGAINST POVERTY AND THE HEALTH CARE SYSTEM

EXPLANATION

In the European context the Czech Republic has good position in the evaluation of low level of exposure of the population poverty. Public budgets by international comparison are not burdened excessive spending on social security system. Poverty is at this moment in CR nominally low, however, represents a potential threat for large groups. Poverty may in its impact to significantly disrupt and threaten the existing health care system, especially in its preventive components.

Changes in the system were registered with the onset of the economic crisis and the situation will worsen with the introduction of planned reforms whose impact will be by identified group very selective.

It shows a negative impact of reducing the standards of living, working opportunities of specific population groups.

Despite the remarkable progress which has seen the system of public health care and is continuously improving population health parameters, our health care system still lags behind the developed world in many critical quality parameters. Investments in health care are not just investing in a healthy workforce, but also in employment (health is a major employer), in education (especially tertiary and lifelong) and research and development.



It is necessary, especially in connection with increasing the age of retirement, to create conditions for the longest active participation of the population in the labour market. This means to ensure and maintain quality and effective health care system.

TARGET

The main objective of national development priority "Promoting social inclusion, the fight against poverty and the health care system" is a particular social prevention to reduce social exclusion, with an emphasis on the inclusion of disadvantaged groups, respectively vulnerable groups in the labour market and also improve lifestyle and health status of the population.

Competitive European economy can't be imagined without effective measures, which help stabilize the social cohesion and focus on problems solution, that are the result of market failures and long-term social processes in society. It is necessary to strengthen the effective social policy, with an emphasis on promoting employment for vulnerable groups, social inclusion, with an emphasis on children and their education, protection against discrimination, support for victims of crime, etc. The Czech Republic should pay close attention to inclusion including the effective functioning of education as a tool for the acquisition of key competencies for the labour market and for a full life in society. Significant improvement in quality, i.e. the effectiveness of education is much cheaper than dealing with the consequences of social exclusion and the inability of adults to succeed in the labour market.

Measures to improve lifestyle and health status of the population support the long-term functioning of economically active and healthy workforce. Investing in the development of the health care system, as well as in the training of health workers not only contribute to improving the health status of the population, but also generally to promote education and employment and thus generally to promote competitiveness.

2.1 Thematic areas of priority 'Promoting social inclusion, the fight against poverty and the health care system'

National Development priority has two thematic supports:

1. Promoting social inclusion and poverty combating



Good conditions for life have their significant social dimension. Emphasis should be placed on the development of social prevention services with reducing social exclusion.

The basic approach is to increase the employability of socially excluded persons and persons at risk of social exclusion in the labour market and support their professional integration. One of the most appropriate tools is to support **social business**, which leads how to conduct solidarity and social inclusion. Particular attention should be paid to vulnerable groups of young people, people of retirement age and disabled people. An important activity is to support inclusive education, further education and equal opportunities. This approach complements effort to increase the competitiveness of the economy.

It is also necessary to promote the development of social work with the aim of preventing and reducing poverty and its negative side effects. Attention will be paid to increasing the availability, quality and development of services for families and children. It should increase the consistency and coherence of employment, social and family policy.

2. Support for the health care system

For good living conditions is to ensure quality and efficient health care system, reduce health and safety risks (including improvement of public health and health care in emergencies) and their prevention.

It is necessary to ensure flexible adaptation of the system of health care economic, social and demographic trends. Supporting healthy aging means promoting health and healthy lifestyles throughout their lives, and tackling inequalities in health related to social, economic and environmental factors.

Lifestyle is currently in developed countries perceived as the most significant determinant influenced health status of individuals or populations. In developed countries with a good level of health care is most involved lifestyle. For improving the health status of the population is therefore necessary to promote a healthy and sustainable lifestyle plus take preventive measures.

Activities affecting the determinants of health that are associated with lifestyle and are considered as the most important for the development of chronic non-infectious diseases should be generally focused: primarily on reducing of smoking and using the tobacco, regular eating habits and good nutrition with associated support adequate physical activities and reducing harmful use of alcohol, especially children and adolescents.



The Ministry of Health, Department of European Funds began recently to work out the theme Promotion healthy life style as one of priority of the Ministry of Health for the next Integrated Operational Programme which could be expressed in a specific call for proposals. The National partner of the Equity Action was invited for consulting ideas, actions and methodology. This Structural Funds Review view as well as former Need analysis Report and other Equity Action documents were appreciated as valuable resources of the Department as supporting documents for addressing the ministerial priority and health inequalities.

The civil servants have aimed to highlighted health inequalities in the next health programme funding. It was agreed that all programmes and campaigns on lifestyle improvement funded by Structural funds should be both, universal and targeted to vulnerable, “hard to reached” and socially excluded population groups. The following high health risk groups were identified: Roma people, migrants and low educated men. The campaigns on healthy style would be tailored on non communicable disease prevention as coronary heart diseases, cancer and diabetes, as well on communicable diseases prevention.

The national partner for Equity action will be informed on the next steps and involved in future development.

2.2 Regional dimension of national development priority ‘Promoting social inclusion, the fight against poverty and the health care system’

1. The thematic priority: Promoting social inclusion and poverty combating

Support will be focused on areas that are significantly threatened by unemployment, lack of social services, high concentrations of groups at risk of poverty or social exclusion and the territory where it is necessary to further develop the infrastructure of social services in order to increase competitiveness and social status of its population (solved in the national framework of development priorities ‘Integrated territorial development’).

2. The thematic priorities: Support for the health care system

Interaction of regions and cities is very important in providing quality and efficient health care system and on the reduction of environmental health risks and lifestyle. In the framework of the



national development priority 'Integrated territorial development' counts with the support of selected regional and local health infrastructure, particularly the health care providers.

3. HRADEC KRALOVE REGION AND FUTURE PROGRAMMING PERIOD 2014-2020

Regions in general:

- welcome and agree with the unification of the conditions for the ERDF, ESF, CF
- prefer maintaining the EU co-financing rate of 85%
- disagrees with the concept of thematic concentration given in the draft regulation⁸
- want to maintain the VAT as eligible expenditure
- agree with significant, but the gradual introduction of financial instruments. A necessary condition is that these tools are cheaper and more accessible than commercially offered products.

3.1. NUTS II NORTH-EAST (HRADEC KRALOVE, PARDUBICE AND LIBEREC REGION)

⁸ Arguments are given in the document "Framework position of Czech regions on draft regulations for the period 2014-2020" Title II - Strategic Approach, Article 9 - The thematic objectives:

Regions with the necessity of thematic concentration of resources generally agree, but disagree with the determination of the minimum amount of shares of expenditure on specific thematic objectives. Regions support that each member state should have the option to choose your own tools and ways of achieving these goals, because only then it will be possible to take into account local specificities and real local needs, which will lead to maximizing the impact of cohesion policy. Identifying and defining the intervention should be based primarily on conditions / competitiveness of the region and also in relation to the competitiveness index model presented in the Fifth Cohesion Report. Setting targets and concentration of support in these targets should not be made uniformly from the central level, but should be based on the real needs of the territory.

Regions also in the thematic objectives are lacking in explicit mention of some crucial issues such as the promotion of tourism, local development initiatives and the broader approach of regional transport networks. These issues are part of the strategic documents and taking into account the development of regions is still considered by regions as essential. Regions within the thematic objectives propose to explicitly mention promotion of tourism, require explicitly mention support of local development initiatives and regional transport networks.



Regional Council of the NUTS II North-East was active and worked out priority directions and areas for own Regional Operational Programme NUTS II North-East for the programming period 2014-2020.

Today, it is almost certain that the individual regional operational programs will be centralized into a single Joint Regional Operational Programme. Joint Regional Operational Programme will address centrally the issue of subsidy in each region. The purpose of this centralization is to reduce the administrative burden that lies on the beneficiaries, but also the unification of the rules of subsidies. The question is what extent will this Joint Regional Operational Programme implemented various priority areas, that are see below defined.

Cohesion regions that defined own priority directions and areas offer them for use in other operational programs.



Priority directions and priority areas of the Cohesion Region

Priority direction 1	Priority direction 2	Priority direction 3	Priority direction 4
Competitive economy	Infrastructure	Social environment and health	Sustainable development of the territory and civil society
Priority area:	Priority area:	Priority area:	Priority area:
1.1 Economic base and business	2.1 Transport infrastructure	3.1 Labour market	4.1 Public Administration
1.2 Tourism	2.2 Technical Infrastructure	3.2 social Services	4.2 Civil society and leisure activities
1.3 Science, research and innovation	2.3 Environmental Infrastructure and Environment	Priority area: 3.3 Health care	4.3 Development of municipalities
1.4 Education			4.4 Rural development and landscape management

Directly for health care and related areas is defined priority direction 3 - Social environment and health. Health care and related areas are addressed in other regional priority directions and areas (e.g. 1.3 - Science, Research and Innovation, 1.4 - Education, 2.2 - Technical Infrastructure, 4.3 - Development of municipalities). It can be concluded that the regional priority directions and areas are in accordance with the priorities at the national level, while there is no mutual overlaps.



3.2. NUTS III - HRADEC KRALOVE REGION

At the level of the Hradec Kralove region is currently preparing a new policy document '**Development strategy of Hradec Kralove Region 2014-2020**'⁹. The preparing of the document is in the middle - currently is finished analytical part including SWOT analysis, it remains to finalize the proposal part and other related activities. The first draft of "Development Strategy of Hradec Králové Region 2014-2020" will be completed in January 2013, in March 2013 should be completed by the final version and in June 2013 should be approved by Regional Assembly. The strategy will be followed by action plan ("Development Program of the Hradec Králové region" – it will address specific funding - budgets in response to the OP). The Strategy is created by Regional Development Agency Centre EP, to the creation are involved relevant departments of the Hradec Králové Regional Office and other entities in the region. One of the priorities will be chapter "Public services and civil society" (public services - public health and social services, civil society - non-profit organizations, etc.). In the framework of the Action Plan ("Development Program of Hradec Králové Region") will be addressed specific steps in the reduction of health inequalities.

General: Strategy - to the level of strategic objectives, the following action plan – to the level of measures and project plans activities.

It will also take into account the document "Strategy of Regional Development of the Czech Republic for the period 2014-2020" - the document the highest level within the regional development of the Czech Republic (direct link to "Partnership Agreement for the programming period 2014-2020" and a direct link to the level below - at the regional strategy) . At the same time (in the analytical part) take into account the so-called "external strategic framework" - an analysis of the external environment (the Czech Republic and EU) in relation to the Hradec Kralove Region (<http://strategie2020.cz/vnejsi-prostredi>).

Directly for health care in Hradec Kralove region is determined the '**Health care concept of Hradec Kralove region in 2011 - 2015**'. The main aim is to provide quality health care to population of the

⁹ 'Development Strategy of Hradec Králové Region 2014-2020' has an impact on negotiation processes (towards to central authorities - regions) – updating of strategies of individual regions were required by Ministry of Regional Development, into strategies are incorporated the outcomes of the negotiation process, these outputs affect the definition of regional priorities (there will be supported only priorities that are consistent with the outputs of the negotiating process, will be defined economically weak areas, will be supported integrated projects, etc.).



region by health insurance. The global objective of this concept is to ensure adequate network of health services by Medical Holding of Hradec Kralove region¹⁰ and Hradec Kralove region in compliance with the development needs of the population and economic efficiency of provided services.

Strategic areas and objectives of the conception:

1. outpatient sector,
2. prehospital emergency care,
3. inpatient health care/ bedded sector,
4. coordination and cooperation of hospitals in region,
5. cooperation between health care facilities and contributory organizations,
6. economy and management.

4. POTENTIAL ORGANISATIONS FOR PARTNER-UP

From the perspective of the Czech Republic, there are 7 working groups focused on the future of EU cohesion policy.

Working Group on Structural Measures (B5)

Working Group on Structural Measures is a working group of the EU Council in the purview of the Ministry of Regional Development, which deals with the implementation of the Structural Funds and the legal framework for the relevant European regulations including amendments.

Departmental Coordination Group of Ministry of Regional Development for the EU RKS MMR)

Departmental Coordination Group is a body of the Ministry for the purpose of the implementation of tasks arising from the membership in the EU in the area of the Ministry of Regional Development.

Interregional advisory group of Ministry of Regional Development for the future cohesion policy (MPS)

The reason for the establishment of the advisory group was sufficient involvement of the regions of the Czech Republic in the debates on the future of the cohesion policy. Ministry of Regional

¹⁰ Public limited company of Hradec Kralove region, designed to manage regional health care facilities.



Development of the Czech Republic consults with regions the opinions on this issue, as well as the partial positions that the representatives of Ministry advocate in Brussels during negotiations in the EU Council. The aim is also more informative value of these positions and thus a stronger mandate. The role of Ministry is to lead the debate, a summary of conclusions, to develop common positions on particular problems and their presentation to the other forums.

Expert Advisory Group on the future of cohesion policy (EPOS)

Expert Advisory Group is an advisory body of the Ministry of Regional Development, composed of experts - prominent personalities. The Group is used to discuss issues, exchange of experiences, serving suggestions, comments and other documents relating to the future of EU cohesion policy, at the national level and EU. Members of the Group comment on the proposals of the Ministry of Regional Development in the area of cohesion policy and submit suggestions regarding the future structure, principles and priorities of cohesion policy for the future programming period 2014-2020.

Parliamentary Consultative Group for the future of EU cohesion policy

Parliamentary Consultative Group for the future of EU cohesion policy serves as an external platform composed of members of Parliament and senator. Group is intended for a political debate with representatives of the Ministry about the strategic documents for discussion at the national level and the EU, which relate to the topic of the future cohesion policy

Interdepartmental Coordination Group for the future cohesion policy after 2013

Interdepartmental Coordination Group for the future cohesion policy after 2013 is an advisory body for the Committee of European Union for preparation of the future cohesion policy in the Czech Republic after 2013. Coordination Group was established by Government Resolution No. 645/2011 and Ministry of Regional Development and Government office are in the chair of the Group. It serves primarily to exchange information about the preparation of Cohesion Policy in the Czech Republic after 2013 and preparation of the new programming period by the Ministry of Regional Development as coordinator of cohesion policy at the national level.

Working Group of Steering and Coordinating Committee on the future of cohesion policy (PS MCC)

Members of this working group analyze documents of the EU, the Czech Republic and other EU Member States which relate to the future of EU cohesion policy and processed an opinion for special department of the Ministry of Regional Development CZ, in whose purview belong the agenda of cohesion policy.

Within these working groups should be partner-up (participants of the Equity Action project are not involved in this working group) with to develop initiatives that address the overlapping regional and



EC thematic priorities particularly 'Interregional Advisory Group of Ministry of Regional Development for the future cohesion policy'. The reason for the establishment of this advisory group was involvement of the Czech regions in the debates on the future cohesion policy. Ministry of Regional Development of the Czech Republic with Czech regions consults opinions on this issue (participants of the Equity Action project are not involved in this working group). The role of Ministry is to lead the debate, summary of conclusions, develop common positions on particular problems and their presentation to the other forums.

There are as well following organizations:

Hradec Kralove Region - Department of Health

Health Committee of the Hradec Kralove region

Medical Holding of Hradec Kralove region

Hradec Kralove Association of NGOs (KRASNNO)

Office of the Regional Council of the NUTS II North-East

Association of Regions of the Czech Republic - Council Commission for Regional Development and European Affairs, Council Commission for Health, Council Commission for Social Affairs, the Executive Coordination Group for European funds, Expert Working Group for European funds

Ministry of Health - Department of European Funds

5. CONCLUSION

About the step 4 Project proposal and SF prospects for health inequalities was dealt by interviews the following organizations:

- Hradec Kralove Region:
Member of the Regional Council of the Hradec Kralove region, who is responsible for health care
Head of the Department of Health
- Office of the Regional Council of the NUTS II North-East
- Ministry of Health - Department of European Funds



Currently at the national level are not defined operational programs, methodology, co-financing, eligible applicants or areas of support. At the moment, negotiations are underway, but outputs are not public.



USEFUL LINKS:

Ministry of Health of the Czech Republic: <http://www.mzcr.cz/En/>

Ministry of Regional Development CR: <http://www.mmr.cz/>

Structural Funds: www.strukturalni-fondy.cz

Hradec Kralove Region: <http://zdravotnictvi.kr-kralovehradecky.cz/>

Regional Information Service: <http://www.risy.cz/cs>

Regional Council NUTS II North-East: <http://www.rada-severovychod.cz/>