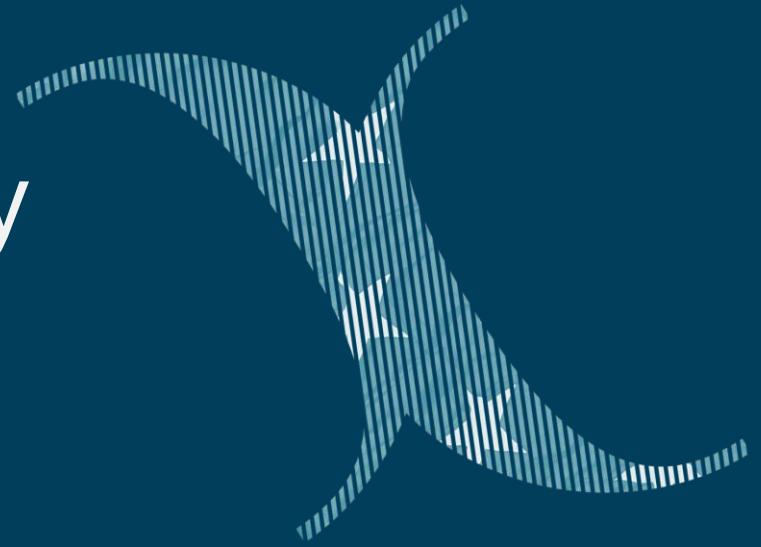


ECBM – state of play and future



CoR EGTC Platform
September 27, 2019, Palma



Jean PEYRONY, DG Mission Opérationnelle Transfrontalière (MOT)



MOT's network

A network of 70 members, from 10 different countries



Catégorie d'adhérents Category of members Mitglieder-Kategorien

- Etat State Staat**
- Région* Region Region**
Canton Canton Kanton
Communauté autonome
Autonomous community
Autonome Gemeinschaft
- Département**
Province Province Provinz
- Groupe plurinational de collectivités territoriales**
Plurinational grouping of local authorities
Plurinationaler Verband von Gebietskörperschaften
- Groupe européen de coopération territoriale (GECT)**
European grouping of territorial cooperation (EGTC)
Europäischer Verbund für territoriale Zusammenarbeit (EVTZ)
- Groupe de collectivités territoriales**
Grouping of local authorities
Verband von Gebietskörperschaften
- Commune**
Municipality
Gemeinde und Kommune
- Entreprise**
Company
Unternehmen
- Réseau**
Network
Netzwerk
- Autre structure**
Other structure
Weitere Struktur
- Personnes physiques** (non représentées sur la carte)
Natural persons (not shown on the map)
Natürliche Personen (auf der Karte nicht dargestellt)





Border: a two-fold reality

1. **A line: limit of sovereignty between 2 States, each of them with its specific legislation, political and administrative culture, welfare systems etc...**

NB : this remains true, notwithstanding EU integration:

EU doesn't cover all policy fields ; and when it does, directives are transposed, sometimes with lack of interoperability.

National differentiation still operates !



Border: a two-fold reality

2. A functional zone, with people living in it, crossing borders on a daily basis

NB : this is of course enhanced by EU integration (single market, cohesion policy with Interreg etc...) ; but it has always been the case !

Such zones have always been subject to international public legislation and agreements (eg in the 19th century around BE, DE, FR etc...), to deal with the everyday life of borderers (special status), such as CB workers or entrepreneurs, professions such as doctors, public services (CB railway,...), right of pursuit...

The EU is fully legitimate to legislate in this area !

➤ **« cross border regions » in article 174 TFEU**

Echo with the DE FR Treaty of Aachen mentioning Eurodistricts and Euroregions



Example of the Hospital of Cerdanya

- ES FR border, one of the oldest European borders (1659, Pyrenees Treaty).
- It has been designed to preserve peace between 2 States. It has never been a « natural border ».
- Specific arrangements have been designed together with the Treaty to accomodate the border and the needs of local inhabitants (grazing rights etc...) .



Mapping the cross border tool box:

Example of the Hospital of Cerdanya

- Funding tool: Interreg
- Governance tool: EGTC
- Obstacles linked with the specific activity of the hospital: many solved, not all
-> need of new tools.





Mapping cross-border obstacles

(ISIG for CoE)

- Border
- Type of geographic area
- Level of solution (local, regional, national, EU)
- Perimeter of action (unilateral; bi/multi lateral)
- Topic (employment, transport,...)
- And nature of obstacles:
 - **technic/administrative: functional dimension**
 - **legal/institutional: political dimension**
 - **economic**
 - **cultural**
 - **lack of knowledge: information dimension**
 - **lack of propensity to cooperate: inter-individual dimension**



How does a hospital work?

6 ISIG dimensions

- Functional (technical, administrative,...) dimension: health requires technics, care protocols
- Economic dimension: how to cover the cost of care? Role of market & public funding
- Civic (institutional, legal) dimension: solidarity through social security; role of public authorities
- Information: opinions about health
- Inter-individual dimension (propensity to cooperate): relations between nurses, doctors and patients
- Cultural dimension (habits, ethics,...)



- Systemic nature of obstacles; for a domestic hospital, a national frame exists to solve obstacles, build compromises between functional/ economic/ civic/etc... logics
- In a cross border context, such compromises are also possible, but with the risk of delays, obstruction

What assessment of the hospital can we make so far ?

- It works, because patients want to live ! nurses and doctors want to cure ! and the ES and FR team is cohesive
- The hospital is a machine to solve obstacles: create compromises
- But too heavy “transaction costs”; idea of a new EU legal tool



- The point is not to delete borders; national health systems deliver... Cohesion remains mainly national
- but to bridge over borders: to build a CB and European cohesion
- Need to create an obligation to manage bottom-up proposals through a multi level process, so as to make (+ or -) decisions explicit => ECBM

European Parliament : report adopted on 14/02/2019

Decision to lift an obstacle or not has to be justified in writing

- Obligation to set up border coordination points in all MS
- Creation by the EC of a data base of all national/regional coordination points ; exchange of good practice, etc ...



Finding innovative solutions to CB obstacles: towards a European multi level platform ?

Different organizations in several parts of Europe have a potential for coordination. They could be made interoperable. This would allow to:

- Take action at each border in support of local/regional players
- Exchange experiences concerning the removal of obstacles on different borders
- Raise awareness of the remaining obstacles at higher levels of government; support the national level; facilitate concertation between neighbouring countries
- Support the European level: manage an European database of obstacles and solutions, fed by the network of organizations quoted above

Source : report of the Working Group on innovative solutions to cross-border obstacles <http://www.espaces-transfrontaliers.org/en/activites-ue/obstacles-intergovernmental-group/>



THANK YOU
FOR YOUR ATTENTION

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