



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health, country knowledge, crisis management
Crisis management and preparedness in health

Luxembourg, 22 April 2020

Health Security Committee

Audio meeting on the outbreak of COVID-19

Summary Report

Chair: Wolfgang Philipp, SANTE C3

Audio participants: AT; BE; BG; CY;CZ; DE; DK; EE; ES; FI; FR; HR; HU; IE; IT; LT; LV; MT; NL; NO; PL; PT; SE; SI; SK; CH; RS; UK, DG SANTE, DG ECHO, DG MOVE; ECDC; EASA; CHAFAEA; WHO

Key Conclusions

1. Exit strategies: The Health Security Committee (HSC) continued to exchange information on exit strategies, focusing on public health/technical aspects in view of the Joint European Roadmap¹. AT, BE, CY, DE, DK, EE, FR, IT, NL, SE, NO, and UK informed on de-escalation measures, epidemiological criteria and plans for lifting social distancing measures. Updates from countries were shared in writing. The HSC agreed to further discuss parameters for de-escalation or reescalation, monitoring impacts and effectiveness of measures, upscaling testing capacities, use of apps and roll-out across the population, as well as approaches to ensure capacities in other non-COVID related healthcare services.

Follow up:

- *The HSC continues to exchange on the above topics; updates will also be shared in writing.*
- *The HSC agreed to share guidelines for reopening certain businesses, including on personal protection for specific professions.*

2. Coordination of sero-epidemiological studies across EU/EEA countries: The HSC discussed ECDC proposal to establish a virtual coordination mechanism for national, regional and local sero-epidemiological studies in EU/EEA. The aims are to ensure rapid sharing of experiences and results and identify the technical needs in countries for undertaking such studies. Serological studies can provide essential information to support the effective and tailored management of the response, provide information on prior population immunity and help estimate the speed of immunity developing during community outbreaks over time, informing vaccination strategies and programmes. The HSC discussed ongoing activities in countries on sero-epidemiological studies, with updates

¹ https://ec.europa.eu/info/files/european-roadmap-lifting-coronavirus-containment-measures_en

from EE and DE. FR highlighted the need for EU level requirement/certification for marketed tests, including rapid tests. The ECDC further informed on activities implemented with national experts on this topic.

Follow up:

- *The Commission asked countries to comment and agree on the draft Terms of Reference circulated in advance of the meeting, by 23 April 10:00, in order to set up a coordination mechanism.*

3. Vaccine development for COVID-19: The HSC received background information on vaccine development and EU activities. The WHO blueprint list of COVID-19 vaccines in development includes three candidates in clinical and 67 candidates in preclinical evaluation. Of the 67 in preclinical evaluation, three are receiving support from European Commission Horizon 2020 funding, and Member States are also investing into several candidates. The European Commission is working with the European Medicines Agency to accelerate the regulatory pathway for a COVID-19 vaccine. The HSC exchanged information on questions on vaccine development possible needs for an EU vaccine strategy. DE and the UK informed about ongoing activities, including research and clinical trials with candidate vaccines.

Follow up:

- *The HSC agreed on the need for further coordination in the HSC regarding vaccine production, distribution, stockpiling as well as common understanding on risk groups and immunization strategy.*
- *The HSC will further discuss the topic of vaccine development.*

4. COVID-19 containment measures in air transport: The HSC discussed a proposal presented by the European Union Aviation Safety Agency (EASA) for COVID 19 containment measures in air transport and in particular guidelines to be applied at airports. The proposal includes measures to be implemented at facilities (e.g., spatial distancing, quarantine, triage, disinfections and cleaning of spaces, provision of PPE, etc.), measures for staff (e.g., education, training, health monitoring, social distancing), measures for passengers (e.g., questionnaires, temperature check, designated airport shuttles to transport inbound travellers) as well as measures for airlines, airports and EASA. The proposal for guidelines for airports needs to be tested and validated via pilot projects. EASA will prepare guidance material to be made available for operators and national authorities for the other elements of the air transport. The HSC noted the importance to launch promptly the process to avoid the risks coming from a lack of harmonized approach for the return to services of the airlines, and highlighted that specific questions on public health aspects and effectiveness of measures (e.g., screening) should be addressed in collaboration with ECDC. EASA confirmed that the guidelines, which are under finalisation will be submitted for review to the Health Security Committee and take into account the results from the pilot projects.

Follow up:

- *The HSC was asked to revert to the Commission with comments on the EASA proposal by 24 April 14:00.*

5. Risk Communication: The Commission provided an update on the activities of the Communicators' Network, convened five times during the pandemic to support the coordination of risk communication. The ComNet discussed topics such as travel advice, common templates for information flyers/leaflets, communication to vulnerable groups, advice on the use of masks, social media and disinformation, as well as shared guidelines

and communication materials. Considering the current low level of engagement and participation by countries, the HSC was asked for comments on the usefulness of the Network, in view of further maintenance during the current phase of the pandemic.

Follow up:

- *The Commission asked the HSC to come forth with proposals for further area of support within the ComNet.*
- *The maintenance of the Network will be decided after the next meeting.*

6. AOB: BE asked for an update regarding the question of case definition for mortality reporting discussed at previous HSC meetings. The summary of replies from countries was circulated to the HSC. The ECDC is in collaboration with its networks in Member States has been working on questions related to the case definition for mortality reporting, in line with WHO case definition.

Follow up:

- *Information from ECDC will be shared with the HSC.*