

EUROPEAN COMMISSION DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health

Health Security

Luxembourg, 06 December 2021

Health Security Committee

Audio meeting on the outbreak of COVID-19

Draft Summary Report

Chair: Head of Unit, European Commission, DG SANTE C3

Audio participants: AT, BE, BG, CY, CZ, DE, EE, EL, FI, FR, HU, IE, IT, LT, LU, LV, MT, NL, PL, PT, RO, SE, SI, SK, NO, DG SANTE, DG JUST, DG MOVE, DG ECHO, DG HR, HERA, SG, COUNCIL, ECDC, WHO

Agenda points:

- 1. Update Omicron variant
- 2. Roundtable discussion

Key messages:

1. Update Omicron variant

On Friday 3 December, a paper concerning Omicron public health measures was sent out to the Health Security Committee. The document highlights the *urgency of implementing swift and targeted public health measures to slow down and contain the spread of the SARS-CoV2 Omicron variant of concern.* This document, once agreed by the Health Security Committee, shall set out the public health measures that countries should focus on and implement now, to bridge this period of uncertainty and to understand Omicron's presence in Europe better.

The **COM** provided the HSC with a short overview regarding the main points set out in the shared document. Data and information are increasingly building up suggesting that Omicron has been circulating in Europe before it was first detected in South Africa. It is likely that **transmission is ongoing**, but that the full extent of its spread is not yet detected not mapped. While researchers are racing to understand the exact threat posed by this variant, we need to limit its spread to the greatest extent possible. **Time is of the essence**, not to stop Omicron from the EU, but to buy time for science and to ensure that the next phase of Omicron will be manageable: for our healthcare systems, economies and society as a whole. Therefore, there is a need for a precautionary coherent approach by EU Member States.

The **document emphasises** the need to increase detection and characterisation of the new variant, contact tracing, re-introduction of non-pharmaceutical interventions, increase vaccination uptake and

the consideration of booster vaccines for those ages 40 and above, ensuring clear, transparent and coherent public communication with targeted messages.

ECDC gave an update on the epidemiology of the variant. ECDC called for more structured information when reporting cases through the Early Warning and Response System (EWRS), including on age/gender breakdown and level of severity. ECDC called on countries to report cases through TESSy. It reiterated that it hopes to have more clarity regarding vaccine effectiveness in the next two weeks.

2. Roundtable discussion

DE mentioned scrutiny reservation due to too many papers, comments will be given in writing. **DE** is <u>not</u> in favor of emphasizing only PCR- and not antigen- testing with regard to all countries as this may slow down vaccination uptake. The paper should refer only to declared virus variant areas.

IE is positive about the paper. The measures to be taken are for the next two/three weeks to prevent the spread of the Omicron variant, while increasing vaccination uptake (also in children) and booster doses in the meantime. In relation to the comment of DE, IE appreciate their concerns regarding the impact on vaccination uptake, however, IE believes it is more important to limit the importation of the new variant. Other measures should be implemented to increase vaccination uptake. IE urges other Member States to require a negative test from all countries before departure, as the UK and US recently implemented. IE also asked ECDC to make a communication on how the transmission mode has changed with the new variant.

FR needs more time to discuss the paper, comments will follow in writing. FR detected 25 Omicron cases so far. On 06 December, FR will announce new non-pharmaceutical interventions.

NL pointed out that its National Institute for Public Health does not regard screening/testing of all incoming travelers from the Southern African region useful. Instead NL has implemented a double test requirement before departure and a mandatory quarantine upon arrival in the Netherlands.

IT in general agrees with the document, comments will follow in writing. IT is moving in the same direction for most of the measures mentioned in the paper. IT already introduced travel bans for several countries from southern Africa, is strengthening non-pharmaceutical measures, and introduces booster vaccination.

HU asked for clarification on the aim of this document.

The **COM** replied that the paper, if endorsed by the HSC, would give an important signal to policy making bodies, including for input to political level discussions. The HSC has the task to coordination on risk managing measures in cases of cross-border health threats in Europe and such a paper falls under this task. **IE** agrees with the importance of a signal from the Health Security Committee.

SI in general agrees with the document. Several measures have already been implemented. SI comments will follow in writing.

BG fully agrees with this document; time is crucial. Quick PCR tests are currently under discussion to be introduced on the borders. BG mentioned that this document can be the basis and/or justification for subsequent national guidance documents and decision making.

BE agrees with the main line of the document, comments will follow in writing.

LU agrees with the document.

ECDC mentioned that the Member States should be ready with community measures, as these measures are still necessary for the DELTA variant, and likely will be necessary in order to restrict community transmission for the Omicron variant. High transmissibility for the Omicron variant is likely, vaccine escape may also be likely given the many mutations. Therefore, ECDC stressed the need to place a strong emphasis on social distancing, testing and sequencing.

RO agrees with the document and will come back in writing after consultation with all responsible authorities involved.

PT mentioned that it is a good document, but needs to discuss it further.

CY agrees with the document, most recommendations are already implemented.

EE needs more time to go through the document. So far, EE has implemented PCR-testing on borders for those who arrive from risk areas. EE also genotypes all S-gen drop outs and sequences Omicron suspected cases.

PL in general agrees with the position proposed by the Health Security Committee to implement targeted public health measures to slow down and limit the spread of the Omicron variant. PL needs more time to further discuss the document and will come back in writing.

AT, FI, LI, SE and NO need more time to discuss the document, comments will follow in writing.

WHO supports the ECDC's intervention above, strong emphasis necessary on social distancing and testing and sequencing.

The **COM** understand that countries need more time to go through the document, however, time is crucial in this moment. The COM expects the Member States to send their comments back on <u>Monday 06 December, 2021 close of business</u>. Following, a new version of the document will be shared with the Health Security Committee on <u>Tuesday, 07 December, 2021</u>. The COM hopes to agree on the paper during the next Health Security Committee meeting on <u>Wednesday 09 December, 2021</u>.