

EUROPEAN COMMISSION DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health Health Security

Luxembourg, 11 October 2021

Health Security Committee

Audio meeting on the outbreak of COVID-19

Special meeting - Draft Summary Report

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

Audio participants: AT, BE, BG, DE, DK, EE, EL, FI, FR, HR, HU, IE, IT, LT, MT, NL, PL, PT, SE, SK, LI, NO, DG SANTE, DG JUST, DG MOVE, DG ECHO, DG HR, SG, COUNCIL, ECDC, WHO

1. <u>Options for indicators regarding the "traffic light" map implementing Council Recommendation on</u> restriction of free movement in response to the COVID-19 pandemic

On 22 September, the Commission presented to the Health Security Committee (HSC) the results of a questionnaire to Member States on the revision of Council Recommendation 2020/1475. 18 out of 26 Member States responded that the weekly traffic-light map produced by ECDC should <u>not</u> be maintained in its current form. 16 Member States indicated it would be better to include further criteria, such as hospitalization, vaccination rate, ICU admission or related to variants on concern. In response, the European Centre for Disease Prevention and Control (ECDC) prepared a policy option paper for a possible review of indicators of Council Recommendation (EU) 2020/1475 (that are the basis for the "traffic light map" available on ECDC's web-site) on 30 Sept 2021. The ECDC presented this paper to the Council's response to crises, the integrated political crisis response (IPCR) on 4 October 2021, and later to the HSC on 6 October 2021. The Commission asked for written comments from the HSC on the paper to formulate a common HSC opinion. The (mixed) positions of the HSC were presented during the meeting, followed by a discussion.

Option 1: Discontinue the combined indicator and travel restriction map (4 MS) Option 2a: Keep status quo – retain the current combined indicator unchanged (1 MS) Option 2b: Keep status quo – retain the current combined indicator but refine it (6 MS) Option 3: Use only one indicator: the 14-day notification rate (2 MS) Option 4: Use ECDC epidemiological country classification (3 MS) Option 5: Use an indicator based on vaccine uptake (0 MS) Other option (3 MS)

EE opts for option 2b with the winter season coming up. EE also agrees with option 2a – but it might not the right timing to stop the system yet.

HR asked if the COM could share the latest information on the recommendation for a booster dose or an additional dose in in different EU countries. **COM** will share the table shortly – as comments may still come in from other MS.

IE agrees with ECDC's recommendation (option 1). Generally, IE disagrees with ECDC that travel restrictions were never helpful. However, given the current prevalence, IE does not to see the traffic light map as very useful. Nonetheless, IE can be flexible and could agree with the majority of the MS.

DE raises the importance of the emergency break with regard to variants of concern, DE is in favour of establishing a working group to find a way forward.

SK and **BG** mentioned they do not have the resources to participate in a working group.

BE mentioned that the intention of this exercise was to simplify the framework and to simplify the risk evaluation in EU and third countries. BE is not against establishing a workgroup, however, the focus should be on refining the whole system, not only the indicators.

FI chose option 2b, as they would be in favour of adding vaccination coverage and circulation of variants to the indicators. However, FI did not use the colour-coded "traffic light" map when it came to travel recommendations. FI therefore considers that it could be beneficial to understand in the first place how MS have been using the system and to look at their needs.

DG JUST responded that will take the comments of the MS into account and will reflect this internally on how to take this forward.

LT opted for option 4. LT sees the need to change the indicators – mainly related to vaccination coverage. LT performs many tests among its population, which impact the country's 14 day notification indicator.

NL is in favour of option 1. NL advocates to set the EU DCC as a standard for travel, independent of the colour code, with exemption when a new variant of concern arises (NL would like to discuss a harmonised approach for new variants of concern).

NO supports the suggestion from DE to establish a working group and can contribute if needed.

Conclusions

The **Commission** did not receive feedback from all Member States yet. It will contact these countries for their opinion. The Commission will also discuss responses received from EU Member States with the ECDC. In addition, the Commission will look into the need to establish a Working Group. Furthermore, the Commission will feed the HSC opinion back to IPCR for further discussion on whether or not to change the related Council Recommendation.