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DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health
Health Security

Luxembourg, 19 January 2022

Health Security Committee

Audio meeting on the outbreak of COVID-19

Summary Report

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

Audio participants: AT, BE, CZ, CY, DE, DK, EE, EL, ES, FI, FR, HU, HR, IE, IT, LT, LV, MT, NL, PL, PT, RO, SE, SI, SK, NO, CH, LI, UK, AD, BA, RS, SM, DG SANTE, DG MOVE, DG ECHO, DG HR, HERA, SG, COUNCIL, ECDC, EMA, WHO

Agenda points:

1. Omicron epidemiological update – Presentation by ECDC
2. Moving from pandemic to endemic management – Presentation by Spain, ECDC, EMA and WHO
3. HSC survey on the EU DCC (possible extension) – Presentation by SANTE C3
4. The health security related priorities of the French EU Presidency – Presentation by FR
5. Publication of call for tenders for service contract to identify obstacles to vaccination of physical, practical or administrative nature and develop recommendations

1. Omicron epidemiological update – Presentation by ECDC

The **European Centre for Disease Prevention and Control (ECDC)** provided an epidemiological update on the OMICRON variant. The overall epidemiological situation in the EU/EEA was characterised by a high overall case notification rate, which has increased rapidly over the past three weeks. While the rapid spread of the Omicron variant continues, both Delta and Omicron are co-circulating. While the risk of severe disease from the Omicron variant appears to be lower, the large number of cases affects hospitalisation and burden on the healthcare system. Very large numbers of mild cases may cause societal disruption due to absence from work. Preliminary data show that vaccine efficacy against severe Omicron effects is expected to remain high after the second dose and prolonged after an additional dose.

FI asked ECDC to specify the waning period with regard to the effectiveness of the third booster vaccination. **ECDC** replied that the effectiveness of the vaccine against infection and symptomatic disease decreases between 10-15 weeks after the third dose. ECDC referred to the [UK HSA technical briefing](#) (see page 3) as a reference point.

EE had a question related to the validity of vaccination certificates for minors under 18-years old. Currently, the validity is set to nine months as a general rule for all vaccination certificates. However, as

there is no EU-wide recommendation in terms of booster vaccination of under 18-years old, the expiry of their certificates is becoming a critical issue. Estonia's government is currently considering to extend the validity period for this group, while awaiting EMA/ECDC recommendations. EE would like to know whether this issue has been raised by other Member States and whether the Commission has plans to review it, as is mentioned in the delegated regulation adopted in December. **ECDC** replied that using the vaccination certificate for travel is a risk management decision. ECDC does not provide recommendations on the validity or use of such vaccination certificates. The **COM** replied that this question could be addressed at the special joint meeting of the HSC and the eHealth network on 20 January, where topics related to the implementation of the EU Digital COVID Certificate will be discussed.

2. Moving from pandemic to endemic management – Presentation by Spain, ECDC, EMA, and WHO

Spain presented a rationale for adapting COVID-19 surveillance and control. COVID-19 is not endemic yet, but probably will be in the near future. To be ahead of events, ES suggests to prepare and coordinate the shift to endemic management at EU level. Ideally, to be implemented after the current wave is over. Background information and disease evolution in Spain was presented to support this shift in COVID-19 management.

CH asked at what point of the Omicron wave recommendation should be changed in the direction of alleviating non-pharmaceutical interventions. **ES** replied that very few non-pharmaceutical measures are implemented in ES. In a few weeks, non-pharmaceutical interventions are expected to be reduced on paper, however, the majority of the population is already no longer applying these interventions.

MT thanked ES for the well prepared and epidemiologically informative presentation. However, MT would like to advise caution especially with risk communication and management to the population as with consider trends to endemicity. Further in line with International Health Regulations (IHR) Article 12, MT would encourage further consultation with ECDC/ HSC and with WHO via IHR – National Focal Point and other mechanisms. Additionally, it is important to keep in mind the following: 1) update of vaccine and incidence /severity of COVID-19 on non-vaccinated and how this could impact health care; 2) emergence of new variants of concern; 3) the population's compliance with non-pharmaceutical mitigation measures, once these decisions are made public. **ES** responded that reflection is very important, as well as disease surveillance and control with a strong communication strategy. ES is aware of and concerned about developments everywhere, therefore ES wishes to work together with all Member States on the monitoring and surveillance evolution strategy. ES is aware that Member States are in different situations and at different stages of the pandemic with different vaccination coverage. Communication with the WHO is highly important, especially at the global level. ES helps with the distribution of vaccines in third countries and hopes that in the near future the vaccination coverage on the globe will be higher. ES agrees with MT that it is important to not send the wrong message to other countries.

HR asked how to envisage further use of COVID-19 certificates in the given context. The **Commission** responded that this is a question to elaborate on in the joint HSC and eHealth Network technical subgroup held tomorrow (20 January 2022).

ECDC mentioned that there are still a lot of uncertainties around the trajectory of the COVID-19 pandemic. ECDC established a small team that is trying to identify plausible future scenarios. ECDC

stressed that it is premature to consider COVID-19 to be currently endemic due to the very high levels of transmission, the irregularity of transmission and the high burden on health systems. Very high global circulation of SARS-CoV-2 increases the likelihood of new variants emerging and the virus being here to stay. Therefore, high levels of preparedness and maximising vaccination and the use of boosters when necessary will continue to be essential to mitigate the severity of future waves and pandemics of COVID-19.

The **European Medicines Agency (EMA)** highlighted the crucial role and impact of current vaccines in the pandemic. However, EMA is looking into adapted vaccines. Approval of a variant vaccine is unlikely to occur before April 2022. Once approved, it may take another three months before manufacturers are able to deliver the new batches. EMA considers a fourth dose for immunocompromised patients to be reasonable. It could be a solution for vulnerable groups to administer a COVID-19 vaccine at the same time as the flu shot on a yearly basis. It is too early to make suggestions for the general population. EMA recently approved the new vaccine NOVAVAX and will soon approve a COVID-19 treatment (Paxlovid). EMA will also continue to look at other antivirals and monoclonal antibodies.

The **World Health Organization (WHO) Regional Office for Europe** emphasised the importance of separating political and social desires from the reality that the virus continues to rage and kill many people. In some places, the experience is very different compared to Europe. In some countries, there is neither a high vaccination coverage nor a high natural herd immunity. Regarding future surveillance, it would be important to separate cases hospitalised *because* of COVID-19, and hospitalised cases *with* COVID-19. There is also need to keep monitoring new variants. WHO will update [current WHO global guidelines on public health surveillance of COVID-19](#) in due course. Earlier, WHO published a [guidance on conducting sentinel surveillance for COVID-19](#) through leveraging existing influenza sentinel systems. An update will be released later this month (January 2022). ECDC and the WHO Regional Office for Europe are organising a network call with focal points for COVID-19 surveillance across the Region on Friday 21 January 2022, where this issue will also be discussed.

3. HSC survey on the EU DCC (possible extension) – Presentation by SANTE

The EU Digital COVID Certificate (DCC) regulation entered into force on 1 July 2021 and applies until 30 June 2022. As the pandemic is still ongoing and recognising the success of the EU DCC, the Commission is currently preparing a legislative proposal to extend its application beyond June this year. Moreover, the Commission may decide to address specific issues related to the implementation of the EU DCC. To support the preparation of the proposal, DG SANTE launched a survey, seeking the views of the HSC on the following issues: content and reading of the EU DCC to make public health decisions in the context of travel; the possible use of Rapid Antigen Tests for issuing EU DCC recovery certificates; and other types of COVID-19 tests (e.g. lab-based antigenic assays) that could possibly be considered by the EU DCC. On 20 January, a dedicated joint meeting between the HSC and the eHealth network will take place to have a detailed discussion on the outcomes of the survey as well as other topics related to the implementation of the EU DCC.

4. The health security related priorities of the French EU Presidency – Presentation by FR

France holds the Presidency of the Council of the EU from 1 January to 30 June 2022. Therefore, FR informed the HSC on the health security priorities of the French EU presidency. FR aims to strengthen economies to enable Europe to succeed in the ecological and digital transitions, to defend and promote

values and interests, to build and develop a shared European vision: through cultures and shared values and EU's common history. FR will organise two formal Employment, Social Policy, Health and Consumer Affairs Council configuration (EPSCO) meetings: on 29 March 2022 and on 17 June 2022. An informal EPSO meeting to exchange views on a Public Health Union will be held on 10 February 2022.

5. Publication of call for tenders for service contract to identify obstacles to vaccination of physical, practical or administrative nature and develop recommendations

On 11 January 2022, the European Health and Digital Executive Agency (HaDEA) published a call for tenders, by means of which the Commission wants to explore to what extent physical obstacles to vaccination has a negative impact on vaccination coverage rates, identify best practices to overcome such obstacles, and pilot such best practices in volunteering Member States. The Commission explained the tasks to be carried out, and the need for Member States to buy-in for this call for tenders to succeed. Possible tenderers may contact Member States to ask if they are interested in participating. Member States can engage with several tenderers, maximum one contract can be awarded. A link to the tender page can be found [here](#). More detailed tender specifications can be found at the bottom of the page under "more information".

The **next HSC meeting** will be held on Wednesday 26 January, 2022. The meeting will focus on different measures that Member States are implement to keep schools open during the Omicron wave.