

EUROPEAN COMMISSION DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health Health Security

Luxembourg, 15 September 2021

Health Security Committee

Audio meeting on the outbreak of COVID-19

Draft Summary Report

Chair: Stefan Schreck, European Commission, DG SANTE C ADV01

Audio participants: AT, BE, CZ, DE, DK, EE, EL, ES, FI, FR, HU, IE, IT, LT, LU, LV, NL, PL, PT, SE, SI, IS, LI, NO, CH, UK, SM, AD, XK, DG SANTE, DG EMPL, DG MOVE, DG ECHO, DG HR, COUNCIL, EMA, ECDC, WHO, EU-OSHA

Agenda points:

- 1. Reopening of schools preventive measures, non-pharmaceutical interventions, measures taken when cases detected information/discussion point
- 2. Follow up: national measures taken to increase vaccine uptake (vulnerable/hard-to-reach groups) information/discussion point
- 3. Health measures in occupational settings presentation by DG EMPL, OSHA, DG MOVE
- 4. AOB Lifting of COVID-19 measures in Denmark
- 5. AOB Studies/data on the Waning effect of COVID-19 and vaccines ECDC
- 6. AOB Debrief of the Transatlantic Task Force on Antimicrobial Resistance (TATFAR) meeting of 14-15 September 2021
- 7. AOB ESI-RAT (Procedure 082) report on the use of donated tests

Key Messages

1. <u>Reopening of schools – preventive measures, non-pharmaceutical interventions, measures taken</u> when cases detected

Since the beginning of September, schools have reopened in many Member States. DG SANTE carried out a survey among Member States, concerning preventative measures and non-pharmaceutical measures that have been taken in the context of the new school year. DG SANTE summarized the results of the survey. Many MS have in place measures such as physical distancing, hygiene measures, hand-washing, cleaning, ventilation, air purifiers, facemasks in certain circumstances, and risk levels for certain age groups and depending on the incidence of positive cases. DG SANTE encouraged Member States that have not yet responded to the survey to do so. A detailed report of the collected answers will be distributed to HSC members. **DE** welcomed this agenda point. DE mentioned that vaccination is a high priority for all people aged 12 years and older. The national testing strategy recommends PCR pool testing for children under 12 years as a screening method at school, using a lollipop swab for collecting samples. The German Federal State decided on test concepts and conditions of infection control measures. The Federal State decided to ensure regular operation of educational facilities after the summer holidays, but with caution. The recommendation is to carry out frequent testing in schools; most of the federal states demand rapid antigen tests twice a week at school and more frequent testing in the week after the summer holidays; in addition, masks are mandatory in closed rooms. The Robert Koch-Institute has published recommendations for contact tracing to give support to local public health offices. When an individual is suspected of having COVID-19/SARS-CoV-2-infection, confirmatory PCR testing of the suspected case should occur and the individual has to stay home until test results are available. If there is a confirmed positive case, the school has to be informed, and contact tracing would be initiated.

IE experienced an increase in theCOVID-19 incidence rate since the reopening of schools.

NL and **DE** had a similar experience as IE. In **DE**, the number of cases in the 5-14 age group is very high, but in comparison, hospitalisation in this age group is the lowest.

In **BE**, there is an increasing incidence among 0 to 9 years old since July. As schools reopened on 1 September, BE is expecting to be able to assess the impact of the reopening itself in the coming days or weeks.

In **ES**, schools reopened last week (week 36), therefore, it may be early to assess the impact on these age groups. However, so far trends in 12 to 19 years old have kept a decreasing trend observed during the last seven weeks.

FI mentioned that during the summer weeks when schools were closed, children aged 0-9 years old consisted of about 4,6 to 9,9 % of the total number of COVID-19 cases. After the school year started, the number rose to about 11,3 to 17,7 %.

FR identified four indicators of legal forms, ranging from green, yellow, orange to red. These indicators are based on the health situation and the spread of the virus, and determines which measures should be taken. Wearing a mask remains mandatory for students. When a case is detected in a classroom, unvaccinated student have to quarantine for seven days.

2. Follow up: national measures taken to increase vaccine uptake (vulnerable/ hard to reach groups)

At the last HSC meeting on 8 September 2021, an extensive point on how to increase the vaccination uptake in the population was discussed. The meeting included presentations on increasing vaccination uptake by the European Centre for Disease Prevention and Control (ECDC); on ethical considerations of mandatory vaccination from the World Health Organization (WHO); and a presentation by the EU funded Population Health Information Research Infrastructure (PHIRI) project. Some Member States also provided their own examples of mandatory vaccination in practice.

• Presentation by RISE-Vac

During the HSC meeting on 15 September, a presentation was given on a project that is currently cofunded under the EU Health Programme: *"Increased access to vaccination for disadvantaged, isolated and difficult to reach groups of population"* by the project RISE-Vac (<u>Reaching the hard-to-reach</u>: Increasing access and vaccine uptake among prison population in Europe). RISE-Vac's main objective is to increase access to vaccination, with a special focus on the prison population and staff. The European prison population has a rapid turnover, as the general imprisonment stay is around eight months in Europe. The general vaccination coverage among prison inmates has indications of being low. Therefore, strengthening immunisation programmes specifically for this population at risk and improving the data recording systems may contribute to better healthcare among prisoners. Offering COVID-19 vaccinations would be beneficial both for the prison population and for the wider community. RISE-Vac collected COVID-19 vaccination data from six European countries (CY, DE, FR, IT, UK, MD). Vaccine hesitancy is higher in prisons in comparison to the general population, which can be related to several factors, e.g. ethnical background and individuals coming from lower socioeconomic groups where there is in general already higher vaccination hesitancy. International and inter-prison transfer resulted in challenges to complete the COVID-19 vaccination schedule among prisoners. In addition, prisoners sometimes are released while having received only one dose,, which complicates follow-up. Regarding future perspectives and opportunities, RISE-Vac encouragers Member States to expand COVID-19 vaccination coverage among prisoners to tackle inequalities in access, to include the COVID-19 vaccination programme into routine vaccination services, to increase community vaccination coverage, and to foster quality preventive care in prison settings and strengthen preparedness for future emergencies.

• EU Survey on vaccination uptake

DG SANTE circulated a survey among the HSC on which measures have been taken in Member States to increase vaccination uptake. DG SANTE encouraged Member States that have not yet responded to the survey to do so. A detailed report of the collected answers will be distributed to HSC members.

DE intervened regarding specific measures taken to reach vulnerable population groups and hard-toreach groups. Amongst the measures that the Federal Government has taken to reach hard-to-reach groups is the organisation of a "vaccination week" from 13 September to 17 September 2021. The goal of this week was to motivate those who have not yet been vaccinated by offering a wide range of lowthreshold access to vaccines (e.g. in sports clubs, schools,) and making those vaccination opportunities visible by collecting all offers, posting them on a web site and also creating a hashtag for the "vaccination week" #hierwirdgeimpft. The purpose of the vaccination week was to create a **social movement** and to raise awareness. Feedback received has been positive.

3. <u>Health measures in occupational settings – presentation by DG EMPL, EU-OSHA, DG MOVE</u>

The Commission is aware that Member States are adopting specific health measures in occupational settings, including periodical testing and vaccination checks. Therefore, Directorate-General for Employment, Social Affairs and Inclusion (DG EMPL) and the European Agency for Safety and Health at Work (EU-OSHA) were invited to present on health measures in occupational setting to prevent and control COVID-19.

DG EMPL mentioned existing EU occupational health and safety (OSH) legislation specifically relevant to COVID-19, including 89/391/EEC EU OSH Framework Directive and the Biological Agents Directive 2000/54/EC (SARS-CoV-2 added to the list of biological agents), several EU frameworks and the establishment of working groups.

EU-OSHA highlighted their "<u>back to work</u>" guidance that addresses actions to minimize exposure to SARS-CoV-2 and other OSH issues (e.g. resuming work after a period of closure and managing workers working from home). EU-OSHA established measures and initiatives during the pandemic: one of the initiatives

was to establish and dedicate a working group, considering the lessons learned of the COVID-19 pandemic related to the occupational setting and health. EU-OSHA also established the <u>OiRA tool-Online interactive</u> risk assessment for COVID-19 and published a joint report with the ECDC on rapid antigen testing at workplaces. On **27 September**, OSH will organise a workshop on COVID-19 and health impacts and recognition as a work-related health outcome.

DG MOVE mentioned the particular case of seafarers, which is a group with low vaccination rates, often due to their particular working conditions. Seafarers come from all over the world, but most of the seafarers working in Europe come from the Philippines, India and Indonesia. The current vaccination rate is about 25%. Some are offered vaccines in their home countries, but those are often not accepted in the EU. Most EU Member States offer vaccination to seafarers. The single shot Janssen vaccine is often recommend for seafarers, as they do not stay in one place for a long period of time, in order to be able to received their second dose.

4. AOB - Lifting of COVID-19 measures in Denmark

Denmark is the first EU country to **lift all COVID-19 restrictions**. DK explained their legal framework and emphasized that while the COVID-19 measures are being lifted at a societal level; individual measures are still in place (e.g. quarantine, testing, entering borders, restrictions on hospitals, nursing homes and in educational institutions). DK will reintroduce social restrictions if necessary.

5. <u>AOB - Studies/data on the Waning effect of COVID-19 and vaccines – ECDC</u>

ECDC asked the Member States to share data and studies on the waning effect (effect of vaccines and natural immunity) and on the vaccination status of hospitalized COVID-19 patients.

6. <u>AOB - Debrief of the TATFAR meeting of 14 -15 September 2021</u>

DG SANTE informed about the two-day Conference of the **Transatlantic Task Force on Antimicrobial Resistance (TATFAR),** hosted by the EU, bringing together all TATFAR implementers from the EU, U.S., Canada, Norway and now also the UK, who just joined TATFAR. The Conference was dedicated to taking stock of TATFAR's progress to date and endorsing the new work plan 2021-2026. The agenda covered: 1) Progress of TATFAR and achievements in addressing antimicrobial resistance, 2) Endorsement of the new TATFAR work plan 2021-2026, 3) Discussion on the place of TATFAR in the landscape of international initiatives to combat antimicrobial resistance.

7. AOB - ESI-RAT (Procedure 082) - report on the use of donated tests

DG SANTE kindly reminded Member States that benefitted from the Emergency Support Instrument (ESI) rapid antigen test (RAT) procedure (082) to send their report on the actual use of the tests. This is a 1-page report and the donation contract signed also specifies that this needs to be sent within 6-months of receipt of the goods.