

Luxembourg, 13 November 2017

Flash report from the Plenary Meeting of the Health Security Committee 9 November 2017, Senningen/Luxembourg

The agenda included topics on vaccination, preparedness, current threats and coordination of national control measures, terror attacks, joint procurement, antimicrobial resistance and re-engineering of the Early Warning and Response System.

22 EU Member States and Norway attended the meeting as well as the European Centre for Disease Prevention and Control (ECDC), and the Regional Office for Europe of the World Health Organisation (WHO/Europe).

1. WELCOME AND ADOPTION OF AGENDA

The Chair, welcomed the members of the Health Security Committee (HSC). The agenda and the minutes of the last plenary meeting were adopted.

2. VACCINATION

EU action on vaccination

The Chair referred to President Juncker's State of the Union Address 2017, which touched on the ongoing large measles outbreaks in a number of countries and the work of the Commission with Member States to support national vaccination efforts.

The Commission will present an initiative on vaccination in the form of a Council Recommendation and action plan as part of the Commission's Work Programme 2018 to support Member States in implementing vaccination programmes, reducing vaccine hesitancy, and strengthening the supply of vaccines. This initiative will aim to strengthen cooperation and communication mechanisms at EU level in order to increase confidence in and sustainability of vaccination programmes, and with a view to improving health security in Europe.

Update on the Joint Action on vaccination

France reported that the Joint Action is under preparation involves 20 countries and is taking an inclusive approach, involving ECDC, WHO/Europe, industries and stakeholders. A dedicated committee for Member States representatives will be created in the governance structure of the Joint Action in order to keep close contact with national policymakers. The proposal includes 8 work packages on the areas of coordination; dissemination; evaluation; sustainability; immunisation information systems; vaccines supplies and preparedness; research; vaccine hesitancy. WHO appreciated the inclusive approach to the Joint Action and expressed support to the

initiative relying on experience from the implementation of the WHO European and global vaccine action plans. Joint Action will be launched early next year, as an important initiative parallel and complementary to the Commission action plan on vaccination.

Follow up:

- Member States are still encouraged join the Joint Action on vaccination as collaborating stakeholders, contacting the coordinator, France.
- Once the work programme is finalised and the Joint Action can start, France will request, through the HSC, Member States to nominate representatives to the Member States Committee.
- The translation of the new Italian law, as well as the French law on vaccination (under translation) was circulated to the HSC. Further national laws will be shared by Member States once adopted, and circulated after translation by the Commission.

3. Plan of actions to strengthen preparedness in the EU to support the implementation of IHR

The Chair introduced the technical action plan for the HSC, which describes the framework and actions to improve preparedness and response planning for serious cross-border health threats, and provides a compilation of ongoing and planned activities to build coherent capacities within Member States and at EU level. The proposed actions are building upon the recommendations and lessons learnt from the Ebola outbreak, the progress report on preparedness and response planning under Article 4 of Decision 1082/2013/EU, and on the recommendations from the European Court of Auditors on the implementation of Decision 1082/2013/EU. The action plan was developed at the request of the HSC, in discussion with its Working Group on Preparedness and Response Planning, involving ECDC. The HSC was also consulted on priorities areas and actions. The paper is a living document that can be regularly updated.

Member States agreed on priority areas of the action plan, emphasising the importance of the EWRS re-engineering, capacity building actions with the creation of a database of lessons learned, laboratory strengthening, collaboration on IHR implementation at European level, including through the National IHR Focal Points, and crisis communication through the HSC Communicators' Network. Several Member States pointed out that the plan is ambitious and stressed the importance to complete activities before new ones are added. Member States therefore proposed a mechanism to report on progress and flagged the issue of coordination related to specific areas preparedness led by other sectors especially related to security threats. WHO/Europe confirmed their support to the implementation of planned actions, and alignment of the Regional action plan on preparedness to be presented to the Regional Committee in September 2018. A high level conference on Health emergency preparedness and response in the WHO European Region is organized in 13-15 February in Munich, with the participation of the Commission.

The Chair reminded Member States of their obligation to provide on preparedness at national level under the 2017 reporting exercise Article 4 of Decision 1082/2013/EU. A progress report on preparedness will be prepared by ECDC for the discussion of the

HSC. The report is planned to integrate available information from country visits/evaluations by ECDC, WHO and other sources to provide a full overview of the state of play with preparedness and better identify needs and target support by the Commission and ECDC. The action plan will be further updated in view of the findings of the report. Several Member States made comments on experiencing difficulties with answering the survey on preparedness under Article 4 of Decision 1082/2013/EU, in particular with regards to cross-sectoral coordination and structures and arrangement in place within Member States. For the next round of reporting exercise in 2020, the implementing act and approach for reporting will be reviewed in alignment with the developments of the WHO IHR Monitoring and Evaluation Framework.

Follow up:

- The Commission is working on increasing collaboration between different services in the organisation of exercises and will provide an update for the HSC.
- Commission will assess necessary changes to the approach of reporting on preparedness in view of the next exercise in 2020, with a possibility to address this issue in the 2018 Report on the implementation of Decision 1082.

4. PREPAREDNESS AND RESPONSE TO TERRORIST ATTACKS

The Chair introduced the background paper, aiming to provide an overview of challenges and action areas to strengthen health preparedness and response to terror attacks under the EU health security framework. The paper serves as a basis for reflection and discussion of the HSC on the priority areas where the Commission, ECDC and Member States could implement further actions contributing, more broadly, to the EU's actions under the Security Union. The paper was prepared at the request of the Health Security Committee as an outcome of the regular exchange of lessons learnt on preparedness and response to terrorist attacks in Member States, and developed in discussion with the Working Group on Preparedness and Response Planning involving ECDC.

Member States highlighted the importance of sharing lessons learnt and best practices, as well as guidelines, protocols and exercises concerning preparedness and response to terror attacks, also related to mass casualty management and psychosocial interventions. At the same time these are topics that mainly fall outside the mandate of the HSC. The rapid information exchange across countries, mobilisation of resources and deployment of medical countermeasures with necessary procedures in place are key to improve response coordination to cross-border threats and multi-site attacks. Actions in the area of biological and chemical threats were considered as priority areas under the mandate of the HSC.

Follow up:

- Actions will be further discussed and followed up by the HSC Working Group on Preparedness and Response Planning.
- Member States to nominate participants to the intersectoral table-top exercise on hybrid threats organized by DG SANTE on 30-31 January 2018 in Luxembourg.

5. CURRENT THREATS

ECDC provided an update on current threats, including the salmonella outbreak associated with eggs from Poland, the outbreaks of chikungunya in France and Italy, the local transmission of malaria in Europe, and the plague outbreak in Madagascar. Rapid Risk Assessments were produced by ECDC for the HSC.

Member States further discussed the epidemiological situation and coordination of national measures related to measles, chikungunya, influenza and plague. The measles outbreak is of high concern for Member States: from January 2016 to October 2017, nearly 19 000 measles cases were reported in the EU, including 44 deaths. Member States shared best practices to prevent further spread on a national level and increase vaccination coverage, including among vulnerable groups. Regarding chikungunya, no new cases have been identified in France since the beginning of October, and the detection of new cases in Italy has been recently decreasing. In case of a warm winter, cases will be expected earlier next year. Vector control measures and their effectiveness were discussed by Member States, including the use of biocides and the importance of involving the local population. On plague, France shared with HSC travel advice and information, communication to airline companies and procedures for the management of plague suspect cases on aircraft. Regarding influenza, the incidence is still low at the beginning of the season, but low vaccine coverage is of concern. Member States exchanged best practices regarding guidelines, communication message and incentives relevant to specific target groups, including health care workers. The meeting of the Chief Veterinary Officers and Chief Medical Officers/HSC on Influenza Preparedness in the context of One Health on 23-24 October in Brussels was referred to by the Commission and Member States.

6. Implementation of the Joint Procurement of medical countermeasures: update and future opportunities

The Commission provided an update on the implementation of the Joint Procurement procedure. Preparatory work related to the joint procurement of pandemic vaccines with 18 Member States involved in the process is at an advanced stage. Member States have expressed interest for joint procurement procedures of further medical products. A gap analysis produced by ECDC on securing diphtheria diagnostic capacity and diphtheria antitoxin availability in the EU/EEA was presented. In the first quarter of 2018 a meeting of the overall Joint Procurement Agreement Steering Committee will be planned to discuss potential future joint procurements of medical countermeasures.

7. UPDATE ON THE JOINT ACTION ON AMR AND HEALTHCARE ASSOCIATED INFECTIONS

France provided an update on the implementation of the Joint Action on Antimicrobial Resistance and Healthcare Associated Infections, launched on 13 September in Paris. The new Joint Action on AMR (2017-2020) supports the implementation of national policy on AMR and HCAI through peer reviews of AMR action, infection prevention – human/animal, and implementing research in priority areas.

A short update was provided by the Commission on the implementation of the European Action Plan against AMR adopted on 29 June 2017. Information was presented on the publication of the EU Guidelines on the prudent use of antimicrobials in human health;

the ECDC/EFSA/EMA second joint report on the integrated analysis of the consumption of antimicrobial agents; AMR training as part of the Better Training for Safer Food Initiative; European Antibiotic Awareness Day and the 23 November meeting on AMR as part of the Estonian Presidency.

Follow up:

- AMR will continue as a key point of the HSC agenda for future meetings.
- SANTE will circulate information on the Estonian Presidency meeting on AMR to HSC members.
- SANTE will circulate details of the TATFAR website and its progress reports and minutes.

8. STATE OF PLAY WITH EWRS REMODELLING

The state of play with EWRS remodelling and the planned structure of the platform, including 7 functional modules, was presented by the Commission. SANTE is closely working with ECDC to make the EWRS compatible with the newest IT technologies, and to integrate features to allow using the system more efficiently for notification and crisis management. This includes transforming the current 'message-oriented' platform into a new, 'threat-oriented' platform, with linkages to other EU early alert systems. An ad-hoc HSC working group was established at the last HSC plenary meeting in June and convened in Luxembourg on 18 September.

Member States welcomed developments and planned delivery of the basic modules, ready by mid-2018. The importance of user-friendliness and structuring the platform in line with the requirements set out in Decision 1082/2013 was highlighted. The planned modular approach, particularly for situation awareness and the linkages to other EU early alert systems were discussed and appreciated by Member States.

Follow up:

• The HSC will be further informed on progress with the EWRS re-engineering.

8. AOB

The Chair informed about the meeting of the Committee on serious cross-border threats to health, taking place on 7 December 2017, in Luxembourg discussing the Draft Commission Implementing Decision on the communicable diseases and related special health issues to be covered by epidemiological surveillance as well as relevant case definitions.

The Netherlands presented their work on iodine preparedness as preventive protection measure from the radioactive accumulation of iodine in thyroid, including the distribution of pills close to nuclear power plant, and a strong communication campaign. Austria raised the decision of WHO not to include neuraminidose inhibitors in the list of essential medicines. This point will be dealt with separately.

The next plenary meetings are tentatively scheduled for 6-7 June and 15 November 2018.