Luxembourg, 15 April 2020

Health Security Committee Audio meeting on the outbreak of COVID-19 Summary Report

Chair: Wolfgang Philipp, SANTE C3

Audio participants: AT; BE; BG; CY;CZ; DE; DK; EE; ES; FI; FR; GR; HR; HU; IE; IT; LU; LV; MT; NL; NO; PL; PT; RO; SE; SI; SK; CH; RS; ME; UK, DG SANTE, DG ECHO, SG; DG BUDG; DG HR; EEAS; ECDC; EMA; WHO

Key Conclusions

1. Update on forthcoming Emergency Support Instrument: The Commission provided an update to members of the Health Security Committee on the forthcoming Emergency Support Instrument (ESI), which was approved by the Council yesterday; the related amending budget is supposed to be approved by the European Parliament later this week as a final step before implementation. The idea is that this provides a flexible crisis instrument to complement those that already exist in Member States and within the Commission. It will be a centrally managed instrument, that will accompany the Commission and the Member States during the current acute stage of the outbreak, during the exit strategy and also during the recovery phase. It will have a budget of 2.7 billion Euros; a further 300 million euros are foreseen for the medical stockpiling of rescEU. The Integrated Political Crisis Response platform as well as the Health Security Committee and the Civil Protection Committee will act as the central fora for engagement with Member States for this instrument. In parallel, a platform for gathering Member States needs has also been launched today by the Commission, in order to get a better picture of the needs.

Follow up:

- In light of the role of the Health Security Committee for this instrument, the Commission will keep this as a regular agenda point and will seek to engage the members of the Committee for feedback and input for ideas.
- 2. Convalescent plasma collection and transfusion for COVID-19: The Commission presented the work, which has been ongoing by the Commission as well as Member States competent authorities for blood. The work concerns the experimental therapy of plasma where there are antibodies, for transfusion that can be taken from donors that are COVID-19 recovered patients. This practice has already started in some countries, such as Italy, South Korea and China and the proposal is to now more routinely bring it into use by

starting with large-scale clinical trials that would provide the basis for evidence of its utility and benefits. The Commission is therefore aiming to provide a collection of evidence, for which it will set up a platform to exchange and input data, as well as ensuring fast access the therapy, should it prove useful. In addition, the Commission is providing guidance, developed with all national authorities, that considers how the therapy can be used, common protocols for collection and use and what kind of outcome data should be monitored. Further information on this work is available on the European Blood alliance website as well at the Commission's COVID-19 website.

Follow up:

- The Commission asks members of the Committee to ensure that this information is shared further with relevant actors within Member States and to promote the engagement of all national authorities in this work.
- The Commission will coordinate this work, and follow up with the HSC working group on clinical case management regarding common protocols.
- 3. <u>Laboratory testing</u>: The Commission presented the ongoing work at EU level regarding the different tests, which are currently available for COVID-19. On 15 April, the Commission published Guidelines on COVID-19 in vitro diagnostic tests and their performance¹. Another working document under preparation aims to stimulate discussions and includes a literary review of the data and propositions for performance criteria. France advised that they are also evaluating and assessing the performance of serological tests and will soon share with the Health Security Committee the first results of the assessment.

Follow up:

- The HSC was asked to provide updates on validation of tests and ongoing work on this topic, as well as on tests used in countries.
- The Communication on Guidelines, adopted today, on testing kits will be shared with the HSC.
- 4. <u>Digital solutions in health care:</u> The Commission presented the ongoing work regarding the toolbox on mobile applications to support contact tracing and warning and in the EU's response to COVID-19. In this respect the Health Security Committee was also invited to the eHealth Network to follow discussions and developments on this file. Belgium noted support for a common EU approach so to ensure a high quality standard for the development of such applications.

Follow up:

- Member States were asked to revert to the Commission on the background paper sent on the toolbox on mobile applications to support contact tracing and warning and the corresponding questions. Specific information on actually used or tested, and on plans should be shared. Interoperability of apps across different countries is important.
- 5. Exit strategies: The Commission noted the ongoing work on this topic both within the Member States and the Commission and, as agreed during the last HSC, the need to keep the Commission and other countries informed of the measures being considered within countries. The ECDC noted their last risk assessment and their surveillance strategy document as reference documents for countries in their approach to de-escalation of measures. ECDC noted that as per their own assessments, there is no indication that we have yet reached the peak of the epidemic yet and that lifting of any measures needs to be

¹ https://ec.europa.eu/info/files/testing-kits-communication_en

based on scientific evidence and knowledge of the situation so to avoid any overwhelming of health systems. The Commission highlighted the Joint European Roadmap towards lifting COVID-19 containment measures² published on 15 April, which should also be taken into consideration by Member States. France noted the decision to extend the social distancing measures and that assessments are ongoing in France, as well as the need for strong EU coordination on this topic. Italy noted that there had been an extension of measures until the 3rd of May with only minor adjustments in the meantime, with the role of the regions to adopt accordingly. The Netherlands noted that measures would remain in place until the 28th of April, public events cancelled until June and that, at this stage, it is too early to relax measures and that pressure on health systems remains elevated.

Follow up:

- The Commission reiterated the importance of sharing of information by countries and as such asked for written input from the members of the Health Security Committee. This should include any plans for lifting measures, including criteria for such actions and monitoring/surveillance in place by Member States. In turn, the Commission will synthesize and compile so that all the information can be shared in an timely and accessible manner with the Committee.
- The link to the European roadmap to lifting coronavirus containment measures will be shared with the HSC.
- 6. Update on joint procurement: The Commission provided the members of the Health Security Committee an update on the ongoing joint procurements. The Commission also highlighted the possibility to instigate a further procurement process for investigational and essential ICU therapeutics, currently needs assessment is ongoing with Member States. The Commission noted that countries that had yet to reply on this topic to please reach out to the Commission accordingly.

Follow up:

• The Commission will follow up accordingly with the Joint Procurement Agreement Steering Committee and the Health Security Committee on this topic as well as with respective pharmaceutical companies.

• The Commission reminded countries to revert to the Commission regarding needs for therapeutics.

 $^{^2\} https://ec.europa.eu/info/files/european-roadmap-lifting-coronavirus-containment-measures_en$