Luxembourg, 14 May 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, FI, FR, HR, HU, IE, IT, LT, LU, LV, MT, NL, PL, PT, RO, SE, SK, NO, CH, UK, AL, ME, DG SANTE, DG ECHO, DG HOME, DG MOVE, DG JUST, ECDC, EMA, CHAFEA, WHO

Key Conclusions

Package on travel and tourism, travel advice: The Commission introduced the package¹ of guidelines and recommendations aiming to help Member States gradually lift travel restrictions and internal border controls, restoring transport and resuming tourist activities after confinement due to COVID-19. The package was adopted in the context of the Joint European Roadmap² and intended to provide guidance for national authorities, companies, stakeholders and citizens. The package includes an overall strategy towards recovery; a common approach to restoring free movement and lifting restrictions and controls at EU internal borders; guidelines on the progressive restoration of transport services and connectivity; recommendation on travel vouchers; guidance for the progressive resuming of tourism services and for health protocols in hospitality establishments. Criteria for gradual lifting, epidemiological situation, containment measures, economic and social considerations, details of a phased approach, coordination mechanism and guidance for the transport and tourism sectors were discussed. The principle of non-discrimination in applying the measures was emphasised. Countries and regions should ensure sufficient health system capacity, such as hospital and intensive care services, if the number of cases are increasing. Elements of the package were discussed with Member States representatives, including in the HSC, the COVID-19 Information Group on Home Affairs, networks for national contact points for transport and for tourism.

Member States (BE, DE, EE, IT, FI, SE) welcomed the package and practical guidance for different sectors. Countries noted the importance of considering the different epidemiological situation in each country, and competitive needs for tourism. The importance of defining criteria for indicators beside transmission rate, such as free hospital beds, ICU capacities, as well as looking at regional level data was noted. The need for extensive consultation and coordination with Member States, and for practicable, effective and scientific-based measures was highlighted.

¹ https://ec.europa.eu/commission/presscorner/detail/en/ip_20_854

https://ec.europa.eu/info/live-work-travel-eu/health/coronavirus-response/european-roadmap-liftingcoronavirus-containment-measures en

ECDC noted that a rapid risk assessment and further guidance is being prepared addressing the question of epidemiological indicators, and monitoring the impact of measures.

Follow up:

- The HSC will continue to discuss and assess exit measures or any important updates regarding borders, tourism and transport.
- ECDC is working on guidelines and epidemiological criteria for the safe reopening of tourism and transport. Countries to submit regional level data for the building of the ECDC map and for allowing to perform a reliable assessment of national and subnational epidemiological situations.
- 1. Exit strategies: Countries (DK, FR, NL, NO, UK) provided an update on de-escalation measures. DK continuing the process of reopening started four weeks ago, with return to workplaces, opening schools for all children, as well as restaurants with precautions according to national guidelines. There is no significant change in the transmission rate so far, the number of hospitalized patients is decreasing. FR started lifting confinement measures on 11 May, accompanied by measures regarding personal protection and laboratory testing. All shops except restaurants and bars are opened. Teleworking is maintaining where possible. NO reported that day-care and schools are reopening from 20 April, gradually for age groups; guidelines on hygiene measures and cohorting are followed in schools. The impacts are monitored, so far has been a steady decrease in the number of new cases, while testing is scaled up. NL started lifting the first measures on 11 May, reopening day-care facilities and primary schools. Telework is in place, all cultural institutions, restaurant and bars will open from 1 June, with certain limitations. The UK reported on recommendations including on teleworking at workplace and avoiding public transport, outdoor activities are allowed. These measures can change at local levels in the next weeks.

Follow up:

- The HSC continues to exchange information on de-escalation measures and the impacts of those measures in details.
- 2. Vaccination plans for COVID-19: The Commission provided an update on the videoconference of the health ministers on 6 May, where many countries noted strong support for mandating the HSC to prepare a COVID-19 vaccination plan for the EU and EEA, as well as expressed an interest in possible joint procurement of COVID-19 vaccines. The HSC expressed support regarding this work. The Commission will provide a discussion paper for the HSC with input from Member States (so far BE, DK, DE, HU, IT, MT, NL, SI, UK), and from ECDC on identification of risk groups, priority groups for vaccination, and settings for vaccination.

Follow up:

- The HSC expressed support to develop an EU vaccination plan and will discuss this in more detail in the next meetings.
- Countries were reminded to send feedback on questions related to COVID-19 vaccination. An assessment will be presented in the next HSC meeting.
- 3. Contact tracing and EWRS process: The HSC has consistently highlighted the importance of contact tracing, testing and isolation as a core part of the COVID-19 response. The scaling up of these capacities should accompany the lifting of confinement measures. ECDC has produced an update of their technical document on contact tracing. The HSC supported the proposal from SANTE regarding the use of a standard template to exchange information

on contact tracing using EWRS, which countries find useful and provided technical comments regarding.

Follow up:

- *The Commission and ECDC will revise the contact tracing template.*
- The HSC was asked to send any further comments in writing, as well as to revert on good practices on scaling up contact tracing capacities.

<u>4. AOB</u>

<u>Potential candidate countries participation in the HSC</u>: The Commission asked the HSC on granting observer status for potential candidate countries in the HSC. No objections were raised by the HSC.

<u>Kawasaki-like disease in children with possible connection to COVID-19:</u> The HSC at its last meeting discussed information about the emergence of a post-inflammatory syndrome in children in Europe, exhibiting symptoms consistent with this Kawasaki-like disease, with possible connection to COVID-19. Cases were reported by several countries. ECDC prepared a rapid risk assessment, which was shared with the HSC and via EWRS³.

 $^{^3 \}qquad https://www.ecdc.europa.eu/en/publications-data/paediatric-inflammatory-multisystem-syndrome-and-sars-cov-2-rapid-risk-assessment$