



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health, country knowledge, crisis management
Crisis management and preparedness in health

Luxembourg, 06 August 2020

Health Security Committee

Audio meeting on the outbreak of COVID-19

Summary Report

Chair: European Commission, DG SANTE C3

Audio participants: AT, BE, BG, CZ, DE, DK, EE, EL, ES, FI, FR, HU, IT, LT, LU, LV, MT, NL, PL, PT, RO, SE, NO, CH, UK, BiH, ME, MK, RS, XK, UA, DG SANTE, DG ECHO, DG JRC, DG HR, ECDC, EMA, WHO

Key Conclusions

1. ECDC Rapid risk assessment: ECDC presented the updated rapid risk assessment on the resurgence of COVID-19 cases. Most notably, the document updated on the epidemiological situation and response measures implemented in the EU/EEA countries and the UK; testing strategies, contact tracing and general and targeted measures to minimise the risk of resurgence of COVID-19 and the various risk profiles on changes countries are observing. The risk assessment also includes a section on vulnerable groups. In terms of epidemiological situation, the increase in cases has continued over the last week in many countries, albeit differently in some areas. Assessment of risk at local level remains important. Regarding age distribution, ECDC noted that when comparing the periods of January – May and June – July the age-distribution was different, overall cases are younger in the current period. These changes could be related in part of the expansion of testing over time. In terms of hospitalization and ICU occupancy, there has been some increase in a few countries, with 28% of reported cases being hospitalized. In terms of testing, most countries have increased capacities, but approach of testing is different in countries, which influences the incidence and total number of cases detected. With regards to the use of masks, the ECDC has been reviewing the latest evidence highlighting the effectiveness of face masks for the prevention of the transmission of the virus, and have updated the recommendation accordingly. Nonetheless, the use of masks should be accompanied by other measures. The Commission reiterated ECDC recommendations supporting the wearing of masks, combined with hygiene measures as well as risk communication. The HSC agreed that implementing the use of face masks in the community when physical distancing cannot be guaranteed should be strongly considered, both indoors and in overcrowded outdoor situations in areas with increased incidence of COVID-19. Regarding testing, the importance of reinforced capacities for testing and rapid contract tracing was highlighted. It was also noted that the 14-days incidence should not be interpreted singularly but alongside other indicators including testing policies, number of tests performed and test positivity for the assessment of the epidemiological situation to inform control measures.

Follow-up:

- *As a follow up to the point in the Communication on short-term EU health preparedness for COVID-19 outbreaks, the Commission circulated a questionnaire to the HSC on testing and testing strategies including input from countries. The HSC was asked to send replies by 20 August as a basis for discussion towards a common testing strategy.*
- *ECDC will share a report on the estimate of the evolutions of the reproductive numbers as a response to the request of Malta.*

1. Update from countries: Exit strategies/deconfinement/reconfinement – impact of measures, and strategies and capacities for testing and contact tracing: IT updated the HSC with regards to the readiness of contingency plans for schools in case of second waves in the autumn. IT also noted that the first result of national serological study is now available, which has data outcomes on prevalence, as well as gender and occupational settings. Finally, IT noted that laboratory capacity has increased from 31 designated laboratories by regions to over 250. The UK noted that last week saw a rise in cases in England, leading to the introduction of new restrictions. The measures implemented are targeted and local. In the meantime, the easing of any other measures will be held back for another fortnight. In addition, the UK is beginning to see the reproduction rate increase towards 1 and is therefore considering different measures that could be implemented so to allow the reopening of key sectors, such as schools. BE asked if the HSC and the Commission could support the sharing of best practices regarding contact tracing.

Follow-up:

- *The Commission asked the HSC to share best practices and contact points within countries for contact tracing. The Commission will follow up on the question from BE related to contact tracing and cluster identification linked to data protection rules. ECDC to help support BE with technical advice and will follow up accordingly to further understand the situation for Belgium.*

2. ECDC guidance on school settings: ECDC presented a report on COVID-19 in children and the role of school settings in transmission, as well as guidance on testing in school settings, which had been shared with the HSC prior to the meeting. Available evidence indicates that child to child transmission in schools is uncommon and is not the primary cause of infection in children. When physical distancing and hygiene measures are properly applied, schools are unlikely to be a source of spread of the virus than other settings with similar densities of people. ECDC highlighted that the closure of school and childcare institutions alone are unlikely to be an effective control measure for community transmission. The UK asked about information on transmission through contaminated surfaces and objects and guidance on control measures. ECDC noted the lack of available evidence and asked countries to share information.

Follow-up:

- *The Commission invited the HSC to share practices, guidance or measures planned related to schools via the HSC or the EWRS. Norway offered to share guidelines on infection prevention and control measures implemented in school.*
- *ECDC was asked to provide further guidance on infections prevention and control in school settings, considering practices in countries and available evidence.*