ecdc

EUROPEAN CENTRE FOR DISEASE PREVENTION AND CONTROL

MEETING REPORT

SECOND CONSULTATION

Outbreak investigation and response in the EU
Stockholm, 15 November 2007

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INTRODUCTION

Regulation 851/2004 establishing a European Centre for Disease Prevention and Control (ECDC) called for an effective response to disease outbreaks through a coherent approach among Member States and input from experienced public health experts, coordinated at Community level[1]. In April 2006, a first consultation of the Member States addressed the role of ECDC in outbreak investigation and response, through the use of practical case studies. These differentiated between outbreaks threatening or affecting more than one Member State and outbreaks outside of the EU. The conclusion of the first consultation was that ECDC's role extends from support to coordination, and may vary according to the disease-specific context.

The development of standard operating procedures defining ECDC's role in outbreak investigation and response in different disease-specific contexts was agreed upon as the main next step after the consultation. This recommendation was taken up in ECDC's 2007 work plan, with an initial focus on food-borne and Legionnaires' disease outbreaks.

OBJECTIVE OF THE CONSULTATION

The objective of this second consultation on outbreak investigation and response was 1) to review the proposed generic framework for response standard operating procedures (SOP) and 2) to review the mode of collaboration with outbreak assistance laboratories (Annexes 1 and 2).

At the end of the consultation, it was expected that:

- an agreement would be reached for the finalisation of the framework for response SOP; and
- the mode of collaboration with outbreak assistance laboratories would be agreed upon.

DEVELOPMENTS IN ECDC OUTBREAK RESPONSE

An overview of the main ECDC response activities since the first consultation in 2006 was presented. Highlights included the progress made in relation to the outbreak assistance teams (OAT) and, in particular, to their laboratory support component; the response-related guidelines and SOPs; the assessment of the magnitude and importance of vector-borne diseases; and the *ad hoc* response activities and expert meetings. The further development of these projects will continue to be the main focus for 2008.

With reference to the response activities related to the case of X/MDR TB in an American traveller (May 2007), Member States confirmed that their expectation was that ECDC would

[1] Regulation (EC) No 851/2004 of the European Parliament and of the Council of 21 April 2004 establishing a European centre for disease prevention and control.

be primarily a scientific and technical reference point. However, there is a role for ECDC in supporting the Member States during similar events of high media or political interest.

The importance of ECDC's threat assessment function was emphasised, stressing the value of strong and straightforward interaction between both indicator- and event-based surveillance on the one hand, and initial response activities (i.e. investigation of the public health alert) on the other hand.

OUTBREAK ASSISTANCE LABORATORIES

Feedback on the expert meeting on ECDC outbreak assistance laboratories (OAL) in June 2007 was given, the conclusions of which focused on the need for coordination and communication at EU level, for a strong network of public health laboratories for outbreak detection and control, as well as for training and capacity strengthening. The report of this expert meeting is available on the ECDC website.

Two main activities followed the expert meeting. The first was the award of a six-month contract to provide a situation analysis of the diagnostic capacity for emerging and re-emerging viral diseases; this project starts in January 2008. The second was the drafting of a three-year framework contract for the creation and maintenance of an outbreak assistance network; this call for tender will be published early in 2008.

With regards to the need for training, the different objectives of the one-week short courses versus the proposed two-year programme were clarified. While the first aim to reinforce communication between national laboratory experts and epidemiologists, the second intends to increase the field experience of (junior and/or senior) laboratory experts in a similar way to the EPIET training programme. In addition, the results from the mapping exercise of existing laboratory capacity in the Member States (project lead by the Scientific Advice Unit) need to be taken into account when designing such laboratory training courses or programmes.

With regards to the focus of the OAL, it was agreed that there should be no overlap with the existing Dedicated Surveillance Networks (DSN). The OAL should target those pathogens and diseases for which no DSN exists.

Finally, reference was made to the European Commission's strategy on laboratory issues (in preparation), and the importance of coordinating all different European initiatives.

GENERIC FRAMEWORK FOR RESPONSE STANDARD OPERATING PROCEDURES

The progress made in the development of the generic framework for the response SOP was presented (See also flow chart in Annex 3). The comments and discussions focused on the following issues:

- *The trigger for ECDC action:* the trigger is a request from a Member State, and should be interpreted in terms of 'risk', i.e. a local risk versus a risk not limited to one single

Member State. The criteria specified in the International Health Regulations (2005) are applicable for the European-level risk assessments.

- *The role of the Member States*: their role, and the expertise they have available for Europe, needs to be made more obvious in the diagram (Annex 3); ideally the diagram would depict the Member States in a central position, and their collaboration with ECDC is constructed around this. Hence the actions taken by the Member States – before any ECDC intervention – are fully considered and the sovereignty of the Member States in outbreak response is respected. This implies that ECDC's focus should remain on its European added value in any outbreak response situation (e.g. coordination), which should avoid extra unnecessary work for the Member States.
- *The role of the Directorate-General for Health and Consumer Protection (DG SANCO) unit C3:* the relation between the 'risk assessment' function (ensured by ECDC) and the 'risk management' function (ensured by DG SANCO Unit C3) needs to be stated more explicitly, while an appropriate use of the available communication tools is ensured. The link between the two functions ultimately aims at a comprehensive approach in the outbreak response at the European level.
- *The implementation of EPIS:* it is expected that the Epidemic intelligence System (EPIS) will allow information-sharing at an earlier stage, which in turn should lead to earlier and well-coordinated action. However, it is important to note that such information-sharing should only occur on relevant events. A first 'triage' is done by the Member States who select which signals or alerts prior to a confirmed event are relevant to share on a European level. If the Member States issue an EWRS message, it automatically becomes an event with a European dimension.
- General comment with regards to the term 'response' in parts of the SOP: it was found that this term is rather confusing, as it is generally interpreted under the risk management function, and not under risk assessment. It was suggested that the term 'response' could be changed to align with the IHR terminology, which would then be 'consultation'.

CONCLUSIONS

It was agreed that the term 'response' should be revised and preferably adapted in accordance with the IHR (2005) terminology. In practice, this would mean that in the case of an outbreak of European relevance (cf. the trigger), a Member State may request a 'consultation' from ECDC. ECDC would then assess the risk to Europe posed by this event and identify the added value that ECDC could bring from the European perspective in response to the event. Such a 'consultation' implies that the Member State provides all necessary information to ECDC that is relevant to the specific event.

Three different levels can be distinguished in ECDC's response to the event:

1. Stand-by: ECDC is informed, receives all relevant documentation and keeps track of a possible European dimension, but does not take an active role in the response activities.

2. General support: ECDC provides mainly administrative support, providing the logistic basis for tele- or videoconferences, writing the minutes of such meetings, sharing them with the involved stakeholders, etc.
3. Technical and scientific support: ECDC provides clear technical support, in the form of guidelines, technical recommendations, technical expertise from across Europe, etc.

The role of ECDC may involve one or more of the above levels. Finally, ECDC should continuously see to it that its actions support the Member States, providing an added European value with regards to outbreak response, and respecting the Member States' sovereignty.

NEXT STEPS

The report of this second consultation on outbreak investigation and response will be shared with all Member States, as well as the advanced draft of the outbreak response SOP, to allow for comments before finalisation.

In the coming year, the response SOP will continue to be developed through the addition of new disease-specific focuses. Tools involving IHR (2005), EPIS and EWRS will be completely integrated into the response SOP, in order to ensure they work seamlessly with the different stages of ECDC's risk assessment function. Activities on outbreak assistance laboratories, and the development and maintenance of the outbreak assistance network in particular, will continue to be developed.

A third consultation on outbreak investigation and response is foreseen in the second half of 2008.

ANNEX 1: AGENDA OF THE CONSULTATION

09:00 – 09:10	Welcome and opening of the meeting *Denis Coulombier*
09:10 – 09:20	Introduction by the European Commission DG SANCO unit C3 *Stephan Schreck*
09:20 – 10:00	Developments in ECDC outbreak response *Evelyn Depoortere*
10:00 – 11:00	Outbreak assistance laboratories *Katrin Leitmeyer*
11:00 – 11:30	Break
11:30 – 12:30	Generic framework for response standard operating procedures (SOP) *Lara Payne*
12:30 – 13:30	Lunch break
13:30 – 14:30	Working groups on SOP
14:30 – 15:30	Plenary and feedback from working groups
15:30 – 16:00	Next steps and conclusions

ANNEX 2: MEETING PARTICIPANTS

Name	Country
Reinhild Strauss	Austria
Daniel Reynders	Belgium
Jozef Dlhy	Czech Republic
Else Smith	Denmark
Irina Dontsenko	Estonia
Markku Kuusi	Finland
Henriette de Valk	France
Dirk Werber	Germany
Kassiani Golfinopoulou	Greece
Athanasios Skoutelis	Greece
Agnes Csohan	Hungary
Gudrun Sigmundsdottir	Iceland
Pasquale Salcuni	Italy
Darina O'Flanagan	Ireland
Olita Kravcenko	Latvia
Jolita Mackeviĉūtė	Lithuania
Jim van Steenbergen	The Netherlands
Preben Aavitsland	Norway
Marek Tomasz Szkoda	Poland
Teresa Fernandes	Portugal
Iuliu Todea	Romania
Adriana Pistol	Romania
Margareta Slacikova	Slovakia
Eva Grilc	Slovenia
Fernando Simón	Spain
Yvonne Andersson	Sweden
Agneta Holmström	Sweden
Sofie Ivarsson	Sweden
Mike Catchpole	United Kingdom
Roberta Andraghetti	World Health Organization – European Regional Office
Stephan Schreck	European Commission DG SANCO unit C3
Alessandra Bo	ECDC
Denis Coulombier	ECDC
Evelyn Depoortere	ECDC
Katrin Leitmeyer	ECDC
Lara Payne	ECDC
Carmen Varela	ECDC

ANNEX 3: DRAFT GENERIC RESPONSE FLOW CHART FOR DISCUSSION