ECDC Advisory Forum

Minutes of the Forty-third (teleconference) meeting of the Advisory Forum

Stockholm, 10 December 2015

Contents

Item 1 – Opening and adoption of the programme (noting Declarations of Interest, if any

1. Andrea Ammon, Acting Director, ECDC opened the session and welcomed all participants.

2. Mike Catchpole, Chair and Chief Scientist, ECDC, welcomed Isabel Oliver, participating on behalf of Paul Cosford, AF Member for the United Kingdom, Aisha Sauer and Frank Van Loock from the European Commission and Nedret Emiroglu from WHO's Regional Office for Europe. He noted that apologies had been received from Estonia, Iceland and Poland. There were no declarations of interest in respect of the agenda items made at the beginning of the teleconference.

Item 2 – Adoption of the draft minutes of the 42nd meeting of the Advisory Forum (12–13 May 2015)

3. The draft programme and the draft minutes from the forty second meeting (May 2015) were adopted.

4. Mike Catchpole, Chair and Chief Scientist, ECDC, provided clarifications on some of the actions from the forty second meeting. In connection with the ECDC Roadmap for Molecular Surveillance the first meeting of the task force on molecular typing for surveillance had recently been held and feedback would be presented to a future AF meeting. Following the discussion on the EU LabCap Survey at the May AF, activities had now been built into the 2016 work programme to start addressing the capacity gaps identified. The HIV, STI and Hepatitis (HSH) disease programme had responded to discussion of its overall programme at the May AF and would focus on evaluating existing guidance rather than only producing more guidance on new topics. Further, the HSH disease programme was proceeding with caution to work on the seroprevalence study on hepatitis, having taken on board the scientific approach suggested at the AF ad-hoc teleconference on 14 September 2015. On the subject of Advisory Forum ways of working, ECDC had taken on board AF members' advice and preferences for ad hoc teleconferences and new members were also being sought for the AF preparatory group. The question of the IRIS process would be discussed at greater length at the next AF meeting in February 2016, as would the results of the training survey.

Item 3 – Draft joint action plan to address recommendations arising from the second external evaluation and the first stakeholder survey

5. Mike Catchpole, Chair and Chief Scientist, ECDC, clarified that the draft joint action plan had been amended to reflect discussions and feedback from the Joint Strategy Meeting in September and the recommendations had already been agreed by the Management Board. Guidance and comments were now being sought from the AF.

6. Franz Allerberger, AF Alternate, Austria, congratulated ECDC on the action plan and said that he appreciated the proposal in Action 2 (Implementing a new training strategy) to bring together EUPHEM and EPIET training into one common track.

7. Isabel Oliver, AF Alternate, UK, had noted that, although some parts of the plan were cost neutral, others involved resources. She therefore wondered which other activities would be impacted or deprioritised as a result. With regard to Action 9 on enhanced partnerships and collaboration with other agencies to prevent duplication, she asked whether it would be possible to have a single entry point or 'one stop shop' where information would be available for Member States to consult on what work ECDC was doing with other agencies and organisations.

8. Mike Catchpole, Chair and Chief Scientist, ECDC, said that many of the actions in the plan were already built into ECDC's work programme and therefore the resources were covered. One area which was not already built in was training and ECDC would need to look at how to cover the resources required for this but it was hoped that it could mostly be covered under existing resource planning.

9. Maarit Kokki, Head of Section, International Relations, ECDC, confirmed that Action 9 related to the work ECDC did with WHO EURO and with other EU agencies and that the idea was to map ECDC activities to those of other bodies more comprehensively in future work plans. In future, approved joint WHO/ECDC work plans would be published and would appear in ECDC's annual work plan. As of 2016, WHO/ECDC joint work plans would also be published on ECDC's website for reference.

10. Mike Catchpole, Chair and Chief Scientist, ECDC, added that there were a number of activities that ECDC undertook regularly with its counterparts, such as the zoonosis report published jointly with EFSA and the joint inter agency report on antimicrobial resistance with EMA and EFSA and that these would be clearly flagged up in ECDC's work programme.

11. Osama Hamouda, AF Member, Germany, pointed out that the issue being addressed in Action 9 referred not only to access to information concerning joint reports on ECDC's website, but also to duplicate survey work done for ECDC and WHO.

12. Maarit Kokki, Head of Section, International Relations, ECDC, confirmed that ECDC had agreed in a recent meeting with WHO to tackle any remaining duplication that either party was aware of. She therefore asked AF members to provide specific feedback identifying any further duplication so that this could be addressed.

13. Nedret Emiroglu, WHO Regional Office for Europe, confirmed the feedback on ECDC's discussions with WHO in relation to the work plan for 2016 and addressing the issue of double reporting. She confirmed that WHO was in full support of the idea of setting up a working group on joint publications and gave its full support to the idea of a 'one-stop shop'.

14. Darina O'Flanagan, AF Member, Ireland, commenting on Action 5 (Improving usability of scientific advice) and the idea of developing evidence-based public health guidance, felt that some of the documents produced by individual Member States and ECDC could be useful for all the countries and that therefore it would be very useful to share them rather than just having them available internally.

15. Mike Catchpole, Chair and Chief Scientist, ECDC, agreed and pointed out that there had been significant interest in the idea of hosting platforms for documents produced by other Member States and/or national authorities, as expressed at the Joint Strategy Meeting. This was already being done for antimicrobial resistance and healthcare-associated infections (ARHAI) and it was highly appreciated and ECDC was committed to looking at how to share documents for other areas. He proposed picking up this issue at a future AF meeting to look at the type of documents that would be most useful to share.

16. Marianne van der Sande, AF Alternate, Netherlands, expressed her appreciation for the document but also felt that there were a number of actions for 2105 that had still not materialised, in particular the issue of avoiding overlap. She was also pleased to see some of the discussions during the Joint Strategy Meeting reflected in the document and optimistic that it would be possible to move forward with these. However, she pointed out that the issue relating to the competent bodies and the consultation of the AF, which was supposed to have been on the Advisory Forum agenda for its December 2015 meeting, had not been included.

17. Mike Catchpole, Chair and Chief Scientist, ECDC, apologised for not including the item on AF consultation and explained that a number of other important items had arisen after the Management Board meeting which had had to take priority

18. Andrea Ammon, Acting Director, ECDC, noted that at the Management Board meeting one of the discussions had been on how to monitor and report back to the Management Board on progress with the action plan. ECDC had agreed that it would provide an update for each action point and report back on whether the milestones were being achieved for each point.

Item 4 – ECDC Single Programming document 2017

19. Andrea Ammon, Acting Director, ECDC, introducing the item on ECDC Single Programming Document 2017, explained that the origins of the Single Programming document came from a statement by the European Commission, Parliament and Council in 2012 on the need for decentralised agencies to base their annual work programmes on a template to aid comparisons.

20. The Single Programming document combined a multi-annual outlook for a minimum of three years, the multi-annual staffing policy, a draft budget for 2017 and the activity programme for 2017. The annual work programme for 2017 was in a similar format to recent years and was accompanied by a list of annexes, some of which could not be provided until the end of 2015. The document had to be submitted to the EU institutions by 31 January 2016. Therefore in future ECDC would have to amend the timing of discussions surrounding this document. The budget for 2017 was anticipated to be same as for 2016. Page 6 of the document set out six strategic areas that ECDC was focusing on in response to the External Evaluation, Stakeholder Survey and the Joint Strategy Meeting. The document had been discussed at the November Management Board meeting before being presented to the AF today. There would also be an opportunity to provide written comments until 8 January 2016. The document would then have to be approved by the Management Board in a written procedure before being sent to the European Commission, Parliament and Council before 31 January 2016. Afterwards ECDC would need to do detailed resource planning by April 2016, before sending the final document to the Commission and the Management Board for approval in June 2016.

21. In the future ECDC would probably have to move its November/December MB meeting to January as it was difficult to comment on the document in a written procedure. The document had also been drawn up to reflect the priorities set by the Commission (HIV AIDS, tuberculosis, hepatitis, antimicrobial resistance, vaccine-preventable diseases and shortages, preparedness and capacity building). The Management Board had emphasised that they wished to have AF feedback on this document and comments were invited from the floor.

22. Jean-Claude Desenclos, AF Member, France, said that he liked the way the activities were mapped to six strategic areas to illustrate priorities, taking into account the recommendations of the external evaluation. With reference to the text on page 6 where the first of the four multiannual objectives was 'to further strengthen the scientific excellence and maintain the independence of ECDC', he suggested that after scientific excellence a phrase should be added: 'in producing evidence for the prevention of infectious diseases in Europe'. This would emphasise the

goal of the scientific excellence, which should be the main driving force. He was also pleased to see the inclusion of a reference to maintaining ECDC's independence which he believed was very important.

23. Marianne van der Sande, AF Alternate, Netherlands, echoed the comments made by the AF Member for France. She felt that the document did a good job of integrating feedback from discussions and saw written comments as an excellent opportunity to incorporate comments and to ask others in the national setting for their input. The structure was helpful for understanding what ECDC was trying to achieve and what the Member States could anticipate in the future.

24. Philippe Harant, Head of Section, Quality Management, ECDC, explaining how ECDC would address the process of written comments, said that AF Members would have received a letter requesting written comments by 8 January 2016. Any comments would then be reviewed and where appropriate changes would be made to the document before a revised version was sent to the Management Board in late January 2016.

25. Andrea Ammon, Acting Director, ECDC, said that all comments were being logged in a repository and information would also be provided on how ECDC had dealt with them so that feedback would be available.

26. Darina O'Flanagan, AF Member, Ireland, said that she particularly appreciated the points on training, capacity building and improving platforms. However, she asked for clarification on the benefits of having a single training programme for EPIET and EUPHEM and wished to know whether the qualification would be an EPIET or EUPHEM qualification.

27. Karl Ekdahl, Head of Unit, Public Health Capacity and Communication, ECDC, explained that the Training section was currently looking at the overall fellowship programme with a view to having a single integrated programme with a single, streamlined recruitment process and a range of modules, some compulsory and some elective, depending on career aspirations. The section was also currently looking at adding one or two modules more focused on healthcare-associated infections. Following the internal review the proposals would be presented to the AF and NFPs for training to obtain their feedback.

28. Isabel Oliver, AF Alternate, UK, said that the programme sounded good but was perhaps somewhat ambitious. It was also not entirely clear what impact it would have on the Member States, especially given that they, like ECDC, had been experiencing reductions in resources. From a content point of view the UK gave its support to the Single Programming document. She requested clarification of plans in relation to Objective 2 on the evaluation of indicator-based surveillance systems and the updating of surveillance objectives. She wished to know whether there would be an evaluation of activities at the local level within Member States, how this would work and whether it would involve a change from the usual subsidiarity approach followed. In relation to Objectives 3 and 4, she wished to point out that the United Kingdom was now moving towards whole genome sequencing in a number of institutions and therefore needed assurance that the quality assurance process would not be jeopardised. She also expressed support for the proposed e-learning approach and wished to know more about how the UK could engage with this approach.

29. Andrea Ammon, Acting Director, ECDC, was unsure whether a plan had been formulated yet on how to undertake the updating of the surveillance objectives but the plans would be discussed with NFPs for Surveillance and it would be possible to discuss any concerns at that point.

30. Mike Catchpole, Chair and Chief Scientist, ECDC, noted the point about whole genome sequencing and recognised that this was a challenging issue because the rate at which the technology was being adopted varied across Europe. ECDC would therefore be looking carefully at how to build it into surveillance objectives without compromising them.

31. Karl Ekdahl, Head of Unit, Public Health Capacity and Communication, ECDC, clarifying the situation with e-learning, said that ECDC was currently in the process of developing its e-learning system. A platform had been set up and it was now looking into the possibility of partnerships with ASPHER and EUPHA in order to be able to share e-learning modules. The idea was to try and get as many partners as possible involved.

32. Mike Catchpole, Chair and Chief Scientist, ECDC, encouraged AF members to look at the document and provide feedback before 8 January 2016 to ensure that it reflected their views, as the primary external source for scientific advice to ECDC.

Item 5 – Collaboration with ASPHER and EUPHA

33. Karl Ekdahl, Head of Unit, Public Health Capacity and Communication, ECDC, introduced the item, providing some background information on the proposed collaboration with ASPHER and EUPHA.

34. Aura Timen, Member, EUPHA, thanked ECDC for the initiative and confirmed that the Governing Board of EUPHA was in full support of the collaboration.

35. Franz Allerberger, AF Alternate, Austria, said that it was important to be aware that ASPHER and EUPHA were private societies that had little or no association with those working in national public health institutes and therefore not representative of the same concept of public health as in the Member States' public health authorities.

36. Jean-Claude Desenclos, AF Member, France said he fully supported the proposal and agreed with the idea of moving forward on this issue. It was good to have collaboration initiatives related to public health training.

37. Marianne van der Sande, AF Alternate, Netherlands, said that it was necessary to be clear what this agreement would add to existing collaboration and to ascertain the risks and the added value before moving ahead, to understand what was being formalised and why.

38. Karl Ekdahl, Head of Unit, Public Health Capacity and Communication, ECDC said that ECDC was aware that large parts of EUPHA and ASPHER were not working with communicable disease control. ASPHER is an association of well more than 100 public health schools and the collaboration agreement among other issues aim to identify those schools with an appropriate curriculum in infectious diseases and bring them into a network working with ECDC on topics of mutual interest. The whole collaboration with ASPHER is designed to complement ECDC training activities with the countries and to share modules/training courses and/or e-learning initiatives already developed within this network. EUPHA is a membership organisation which does not work extensively with communicable diseases, however it has a large and active section on infectious diseases which is chaired by Aura Timen, ECDC's EUPHA representative on the Advisory Forum. The idea would be to work together e.g. to ensure better dissemination of information. For example, ECDC's presence at the EUPHA conference and EUPHA presence in ESCAIDE. He stressed, however, that in any collaboration ECDC would be required to work within the confines of its mandate.

Item 6 - Surveillance of human immunodeficiency virus (HIV) antiretroviral resistance in the EU/EEA

39. Eeva Broberg, Expert, Virology/Influenza, Surveillance and Response Support, ECDC, presented the paper and provided some background information, explaining that, with the expansion of the long term use of ART and the introduction of PrEP, this was an important area where there was currently no EU-wide data collection for monitoring which was why ECDC was looking into this topic. The floor was then opened for comments.

40. Osama Hamouda, AF Member, Germany, said that he was in support of surveillance for HIV antiretroviral resistance as it was necessary to know the degree of resistance out in the whole community. He asked whether the plan was to collect data on resistance already available (i.e. results of national surveillance data on specific resistance).

41. Jean-Claude Desenclos, AF Member, France, said that he agreed with the objective and potential outputs and usefulness. However, he requested clarification on the intention of the secondary objective as he felt it might be difficult to implement.

42. Fernando Simón, AF Member, Spain, agreed with the document in general, but was interested in obtaining more information on the timeframe for implementation.

43. Darina O'Flanagan, AF Member, Ireland, said that Ireland was in support of the document and agreed that it would be beneficial to monitor resistance trends, however she also felt that the secondary objective could be difficult to implement

44. Isabel Oliver, AF Alternate, UK, agreed with the comments made by others and was generally in support of the document.

45. Robert Hemmer, AF Member, Luxembourg, agreed with the two objectives and the comments by the AF Member for France. Luxembourg had the appropriate data and would be able to contribute.

46. Osama Hamouda, AF Member, Germany, pointed out that although the primary objective was clear, the secondary objective would involve having sequence data available and this would be more complicated.

47. Andrew Amato, Head of Disease Programme, HIV, Sexually Transmitted Infections and Viral Hepatitis, ECDC, responding to the comments on implementation, said that ECDC was still developing the detailed planning with an expert group. The next step was the presentation of a paper at the HIV STI network meeting in March 2016 for discussion of the details. Two approaches are being considered for the start. Data could be collected from those countries that already do such tests and then reported in aggregate form to give an indication of the resistance trends. The problem with this approach was that it would then not be possible to undertake cluster analysis. Another problem with this simple strategy was that this data is collected from countries with relatively well-developed treatment protocols and regimes and it might be more difficult to obtain a picture of the situation in other less well-resourced countries. For this reason, a second approach may be needed providing some kind of centralised support to ensure that data would also be collected in less resourced countries. Responding to the question on the timeframe, he said that this is a long term project and each step will need to be evaluated before proceeding to the next, so it would take quite some time.

48. Eeva Broberg, Expert, Virology/Influenza, Surveillance and Response Unit, ECDC, clarifying the objectives, said that ECDC wanted to focus on monitoring resistance and prevalence trends first using available resistance data, even in aggregate format. The secondary objective would be to collect sequence data and case-based data and

here it would be necessary to work closely with the countries to specify their needs and determine the availability of such data. ECDC would also have to critically examine the benefits of mapping at EU level since many of the outbreaks were at the local level.

49. Frank Van Loock, European Commission, said that in principle the Commission was in support of the idea however it shared the concern expressed by Andrew Amato on the added European value. To achieve the goals of this project and include data from the less resourced and therefore higher risk countries would be to develop a proper parallel training component on typing. Otherwise the result would be a very disparate map across the EU, where resistance and cluster patterns would be easily detectable in areas not requiring extra support and less information would be available for those countries where support was needed.

50. Andrew Amato, Head of Disease Programme, HIV, Sexually Transmitted Infections and Viral Hepatitis, ECDC, agreed with the Commission's comment and confirmed that they were aware of the problems with resources in these countries and the need for capacity building and would keep this under consideration.

51. Eeva Broberg, Expert, Virology/Influenza, Surveillance and Response Unit, ECDC, said that ECDC is about to launch a project assessing country capacities as a first step in around two months' time.

52. Mike Catchpole, Chair and Chief Scientist, ECDC, thanked the AF Members for their contributions, noting that there seemed to be strong support for the project. ECDC would revert later for further feedback.

Item 7 – Authorship statement for ECDC outputs

53. Mike Catchpole, Chair and Chief Scientist, ECDC, gave a brief introduction and asked for comments on the wording and/or the range of outputs that the statements should be used on.

54. Franz Allerberger, AF Alternate, Austria, endorsed the statement, saying that ECDC had been doing a good job on authorship so far.

55. Jean-Claude Descenclos, AF Member, France, noted that the institutions to which colleagues were assigned were not mentioned. He felt that this information was vital as all the AF Members' institutions were working together as part of the EU.

56. Fernando Simón, AF Member, Spain, pointed out that one of the issues raised at the Joint Strategy Meeting in connection with the authorship debate was the possibility of involving more people from the institutions in the Member States when ECDC was preparing documents and reports in order to get their feedback and comments.

57. Osama Hamouda, AF Member, Germany, supported other comments by the AF Members from France and Spain, noting that he was faced with similar situation at national level. It was impossible to include and acknowledge everyone, but he suggested acknowledging the specific people involved in a list at the back of a publication.

58. Mike Catchpole, Chair and Chief Scientist, ECDC, agreed to look again at the broader issue of how to better engage colleagues in contributing to the development of outputs. With regard to names appearing in reports, he pointed out that this would mainly be the names of NFPs or coordinators whereas the issue from the floor was more that those working at local level and generating the data felt that they were not being acknowledged.

Item 7 – Any other business

59. Mike Catchpole, Chair and Chief Scientist, ECDC, asked the members of the AF preparatory group to confirm whether they were willing to continue for another year and whether there were any other AF members interesting in joining the group. The idea of the group was to help prepare for AF meetings in advance and to identify any additional issues that had not been addressed. He asked AF members to declare their interest in writing by email, either to himself or to the Corporate Governance secretariat.

60. Jean-Claude Desenclos and Andreas Gilsdorf (via Osama Hamouda) confirmed their interest in continuing. Darina O'Flanagan wished to stand down in the light of her impending retirement in May 2016.

61. Mike Catchpole, Chair and Chief Scientist, ECDC, thanked all the participants for their constructive feedback and apologised for the technical problems at the beginning of the teleconference. He concluded the meeting by wishing everyone a happy holiday season and best wishes in 2016. He looked forward to seeing everyone at the next AF meeting on 25-26 February 2016.