



MEETING REPORT

Ad hoc advisory meeting on preparedness

Stockholm, 15–16 May 2014

1 Introduction

The Country Preparedness Support section of ECDC held an ad hoc advisory meeting on preparedness in Stockholm on 15–16 May 2014. The meeting gathered nine National Focal Points for Preparedness and Response; representatives from the WHO Regional Office for Europe; the Directorate General for Health & Consumers (DG SANCO); and the Consumers, Health and Food Executive Agency (CHAFAEA).

The objectives of this informal consultation were:

- to review and get feedback on ongoing projects in the field of preparedness;
- to start planning the annual meeting of National Focal Points for preparedness and response (scheduled for 15–16 October 2014); and
- to discuss priorities for ECDC's preparedness activities in 2015 and beyond.

The opening of the meeting underlined ECDC's interest in hearing the views of the Member States and their opinions regarding preparedness, while emphasising the importance of the National Focal Points structure on which ECDC's technical work is based. The new context for preparedness activities at ECDC was stressed, mainly the new legal framework (Decision 1082/2013/EU¹ on serious cross-border threats to health), which is supported by a new team (in June 2013, ECDC established a section for Country Preparedness Support) and a new framework contract signed in April 2014 between ECDC and several external contractors who will provide preparedness-related services.

¹ Decision No 1082/2013/EU of the European Parliament and of the Council of 22 October 2013 on serious cross-border threats to health and repealing Decision No 2119/98/EC

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Session 1: Report and discussion on ongoing 2014 preparedness projects and activities

Members of the ECDC section for Country Preparedness Support presented the section's current activities, with additional contributions from some of the contractors who collaborate on these projects.

Literature review on the overlap between preparedness for communicable diseases and other types of health threats

The purpose of this review is to empirically test a hypothesis according to which 80% of measures taken in the face of an emergency are common to all sorts of events, 15% are specific to the hazard faced, and only 5% are unique to the event at hand. A contractor was asked to review the response to specific events falling under the different categories of serious cross-border threats to health, as defined in Decision 1082/2013/EU.

The group discussion on the literature review highlighted the importance of developing a common terminology and a shared understanding of preparedness concepts across Europe. Participants mentioned several existing conceptual frameworks and event-management data models that could be applied to analyse preparedness in a structured manner. Suggestions were also made to address issues such as the intentional release of biological agents.

Case study on interoperability in preparedness and cross-sectoral coordination

This project consists of a case study focused on three countries exposed to an emerging respiratory virus (pandemic influenza or coronavirus). The objective of the case study is to look into cross-border interoperability issues and cross-sector collaboration when dealing with such a threat. The proposed methodology foresees one-week country visits to conduct interviews with key informants from different sectors at the country level. The possibility to launch a second case study on poliomyelitis was discussed; work may be started later this year.

The ensuing discussion addressed the selection of countries for the case study and suggested additional sectors to be covered (such as food safety and animal health). Coordination mechanisms between EU agencies should also be covered in this context. The added value for countries was also discussed, namely the fact that participating in the case study could contribute to raising awareness and foster discussions at the country level on the importance of cross-sector collaboration, as mentioned in Decision 1082/2013/EU.

Development of a tool for self-assessment of health emergency preparedness

The objective of this project is to develop an instrument for the systematic assessment of a country's preparedness that is useful to leaders and planners in EU Member States. This instrument will take stock of, and build on, existing tools and methodologies (such as the IHR Monitoring Framework, the US National Health Security Preparedness Index, the WHO Emergency Response Framework, etc.).

The follow-up discussion mentioned the importance of following the new reporting process established under Article 4 of Decision 1082/2013/EU as well as the challenges of establishing what could be minimum requirements for preparedness in Europe. Setting up such benchmarks would help draw conclusions from the self-assessments by indicating areas which require further strengthening. Minimum requirements could take the form of a checklist providing operational guidance to Member States for the technical implementation of Decision 1082/2013/EU. It was also suggested that ECDC use a modular approach so that certain modules of the instrument could be used for assessing specific areas of preparedness; modules should not only focus on 'hard' capacities, but also include qualitative indicators related to event management. Some National Focal Points encouraged ECDC to also make this tool usable at the sub-national/local level. Finally, it was pointed out that the results should remain at the country level because the tool was primarily a self-assessment tool.

Developing a robust methodology for ranking and prioritising current and emerging infectious disease risks

This project aims at developing a methodology to identify and rank emerging infectious disease risks, starting with a systematic review of existing methodologies (in the field of infectious diseases but also from the broader disaster risk reduction community). A risk ranking handbook will then be developed and pilot-tested with some Member States. Conducting such an exercise can assist countries in the allocation of resources for infectious diseases and help them strengthen their preparedness.

The National Focal Points for preparedness and response welcomed this initiative and warned against a uniform assessment of risks at the EU level, as individual countries will typically face different types of risks. ECDC was also encouraged to link this project with similar initiatives undertaken by other sectors. Eventually, such an exercise could feed into the broader annual integrated threat and risk assessment report that the Commission will provide to the European Council from 2015 onwards.

Joint training in bio-preparedness

The objective of this project is to develop and deliver, in cooperation with EUROPOL, a sustainable training concept on threats from accidental or deliberate release of biological agents. After conducting a needs assessment, a 'bio-curriculum' will be developed, which will then be pilot-tested, adjusted, and rolled out in 'peace time' to strengthen preparedness for response to biological threats in Member States.

Session 2: 2014 National Focal Points meeting

This session discussed the annual meeting of National Focal Points for Preparedness and Response, scheduled for 15–16 October 2014. A first presentation summarised the conclusions from last year's annual meeting. In a second one, the European Commission and CHAFEA presented their past and current activities in the field of preparedness. The participants were then invited to express their expectations and provide suggestions for desired outcomes, content and format.

Participants recommended that the meeting should:

- focus on building a preparedness community at the European level, e.g. by developing a consensual common terminology, operational definitions of preparedness concepts, dealing with regionality within Member States, etc. It may therefore be useful to restrict topics to public health emergency preparedness without involving other sectors at this early stage;
- encourage small group discussions focusing on specific topics or practical examples/scenarios and leading to concrete outputs;
- promote the exchange of good practices, plans and lessons learned between countries;
- integrate suggestions made during DG SANCO's regional seminars on Decision 1082/2013/EU and focus on operational and technical aspects associated with the implementation of this Decision (e.g. in the field of business continuity planning, emergency operations centres or cross-sector collaboration);
- map key evidence gaps and capacity gaps for preparedness and link these with the roles of the different actors for preparedness in the EU; and
- investigate the sometimes neglected recovery aspects of emergency preparedness.

Session 3: ECDC and future priorities of its partners in the field of preparedness

This session consisted of presentations by the participants on the priorities of their organisations (i.e. national public health institutes, ministries of health, WHO Regional Office for Europe, DG SANCO, ECDC) in the area of preparedness, with a view to identifying synergies and developing complementary activities in the future. In his presentation, the representative from DG SANCO covered relevant activities planned by other Commission services.

Most countries pointed out the implementation of the new Decision 1082/2013/EU as a key priority for the coming years.

Recurring priority themes included:

- the strengthening of cross-sectoral cooperation;
- the development or revision of preparedness plans;
- the development of a more generic approach to preparedness and the balance between generic and specific planning;
- the organisation of training courses and simulation exercises to test response plans and, more generally, ensure that national planning translates into local implementation;
- the evaluation of response capacities at all levels and coordination mechanisms between them;
- IHR implementation in overseas countries and territories (for NL and UK); and
- public health preparedness-related issues associated with migration.

Planning for 2015 and future interactions of ECDC with countries and partners

This final session built on the previous ones. In working groups, participants were invited to identify and rank what could be ECDC's priorities for the coming years. The outcomes of this exercise were in line with the stakeholders' priorities presented in the previous session, with focus on ensuring EU-added value, for example by:

- supporting the Health Security Committee and the European Commission in their preparedness activities (e.g. through technical support for the analysis and use of the results from data collected in the context of Decision 1082/2013/EU or by producing methodological and practical guidance as well as training activities on preparedness);
- supporting intersectoral activities and incorporating a cross-sector engagement component to ECDC risk assessments;
- identifying minimal preparedness requirements to ensure an efficient cooperation between countries in the context of cross-border threats to health;
- developing a common perception and terminology for preparedness at EU level;
- providing an EU repository to exchange good practices, guidelines, training and exercise materials;
- fostering multi-country, sub-regional collaboration to strengthen cross-border interoperability (through workshops, exercises, simulations and during real events); and
- compiling available evidence, identifying evidence gaps and coordinating multi-country studies to bridge these evidence gaps.

Conclusions

This consultation provided valuable input for ECDC which will inform ECDC's future activities in the area of preparedness and ensure that the results produced will be of direct use for the Member States, while acknowledging the Member State's diversity and taking into account their different needs and expectations.

There is a perceived role for ECDC to provide technical and scientific support at all stages of the preparedness cycle: from tools to assess threats and vulnerabilities to identifying gaps, strengthening capacities, training and testing, compiling lessons learned, back to revising and updating plans. Clearly, providing scientific and technical support for the operational implementation of Decision 1082/2013/EU on serious cross-border threats to health

was perceived as a major area of ECDC support in the near future. The extensive experience acquired by ECDC and Member States in the field of pandemic influenza can certainly provide useful insights in this respect.

Having a small group of National Focal Points acting as advisors on preparedness topics proved to be an efficient mechanism to ensure ECDC's activities remain close to the interests of its national and international counterparts. This ad hoc consultation could therefore lead to the appointment of a permanent coordination committee which could be elected at the annual meeting scheduled for October 2014.