

ECDC Management Board

**MB10/Minutes
14 December 2008**



**Minutes of the Tenth meeting of the ECDC Management Board
Vienna, 14–15 June 2007**

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Summary of decisions

The Management Board:

- Approved, in accordance with the Founding Regulation, the list of competent bodies and requested to review it at the December meeting of the Board before it is made public; it also agreed that the list should be reviewed by the Board in one year time;
- Approved the proposed strategic Multiannual programme 2007-2013 except for Annex II on indicators which will be further developed by ECDC and submitted to the Board at the December meeting;
- Adopted an opinion on the final annual accounts for 2006 in view of requesting the discharge of the Director to the European Parliament and in accordance with the Financial Regulation;
- Adopted the amendments to its rules of procedure;
- Decided that its existing working group, together with the 3 chairmen of the Advisory Forum's working groups, will work on ECDC priorities for 2008 to be reviewed by the Management Board for its approval at the December meeting;
- Adopted unanimously that English will be the language regime for the meetings of the Advisory Forum and the publications and information on the website to the experts and public health officials; it also unanimously adopted that the information brochures and static website information for the general public will be published in all EU official languages plus Icelandic and Norwegian;
- Agreed to postpone the decision on the language regime for the meetings of the Board and that current arrangements should continue;
- Adopted the definition for the Centre's internal rules and the Code of good administrative behaviour;
- Adopted the decision to give authority to the Director to adopt implementing rules regarding staff regulations;
- Agreed that future comprehensive epidemiological reports be published every 3 years, with shorter subject-oriented reports published between 2 reports annually and that the TESSy database would provide updates on trends annually; threat monitoring reports would also be published annually as required by the Regulation;
- **The Management Board also:**
- Welcomed the Director's briefing on progress made in the Centre's work; congratulated her on the work done and progress made and suggested that future presentations summarize strategic issues;
- Took note of the amendment to the budget 2007 made by the Director within her authority according to the Financial Regulation;
- Acknowledged the efforts made by Sweden towards the conclusion of a Seat agreement for ECDC and to facilitate the living conditions of ECDC staff, in particular with regards to access to health care services; the Board requested its chairman to write to the ministries involved to express the Board' concern and to request information on action taken and on the timetable;
- Welcomed the Director's proposal to organize a briefing for all members of the Board on the Units' activities the day before the next Board meeting.

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Opening and welcome by the Chair

1. The Chair opened the 10th meeting of the Management Board (MB) kindly hosted by the Ministry of Health of Austria and welcomed all participants in Vienna. A particular welcome was extended to newly appointed members, notably from Liechtenstein and Bulgaria.
2. Apologies were noted from Mr Octavio Quintana Trias and his alternate Dr Anna Lönnroth, as well as Mr Stefan Schreck from the European Commission (EC). Apologies were also noted from Lithuania.

Item 1. Adoption of the Agenda (*document MB9/2 Rev.2*)

3. The agenda was adopted. The discussion of item 3 (final annual accounts 2006) scheduled for 14 June was postponed until 15 June. No additional items were added to the agenda.
4. No proxy statements were received. It was informed that for the indication of possible conflict of interests, a sheet had been distributed to the members in order to register any declaration. The Chair declared that his institute hosts a disease-specific network.
5. Due to time constraints, as the meeting progressed, some agenda items needed to be moved in order to give priority to the discussion of matters for decision. The discussion of item 12 on external groups of experts was postponed until the next MB meeting.

Item 2. Adoption of the draft minutes of the 9th meeting of the Management Board in Stockholm, 20–21 March 2007 (*document MB10/4*)

6. The minutes, having been circulated by written procedure, were adopted without change, as neither written nor oral comments were received.

Item 3. Final accounts 2006 (*document MB10/5*)

7. Jef Maes, Head of the Administrative Services Unit briefed the MB on the meeting of the Audit Committee and the conclusions reached. He informed that the Committee discussed the preliminary draft version of the report of the Court of Auditors on the final accounts 2006. The issues raised and recommendations made were then explained. Regarding the draft Opinion of the MB on ECDC 2006 Final Accounts, the Committee's conclusion was then presented.
8. The Chair then asked the MB if it approved the draft text of the opinion of the MB on ECDC final accounts. It was approved unanimously.

Item 4. ECDC strategic multiannual programme 2007–2013 (*document MB10/7*)

9. The Director explained the current position with regards to the multi-annual programme and outlined the changes that had been made to the strategy document following guidance from members at MB8 and MB9 meetings.

10. The members were asked to approve the document, but the Director requested more time to work on the indicators (Annex II).

11. Members welcomed the improvements that had been made and appreciated the efforts made to incorporate their comments.

12. Members agreed that the indicators needed further work. They should be redrawn to focus on results and impact, and to ensure European added value. It was also stressed that the emphasis should be on quality not only quantity indicators, and one member commented that to have a large number of products is not an incentive to ensure high quality. In addition one member remarked that the plan is still very ambitious which is especially daunting for the smaller Member States. There was a call for more focus and to maintain a balance. The Director acknowledged the comments and will present a revised Annex II at the December meeting.

13. Concerns were raised by two Member States over the transfer of the DSNs to ECDC and the feeling that ECDC may have under-estimated the difficulties of the transition. A lot of uncertainty within the network hubs could lead to a loss of commitment from expert staff. The Director reassured members that ECDC takes this very seriously and will only bring networks in-house when the current standard can be guaranteed. However, members were asked to bear in mind that ECDC does not have many options on this in line with the Financial Regulation: 2007 is the last year that contracts can be agreed by analogy. (The purpose of this arrangement over the last 2 years was to ensure a smooth transition). The only options after that are to bring the network into ECDC or to open up a competition.

14. Other comments included: the TESSy project was perhaps too technology-driven and needs to be more focused on the content; Training (target 5) is now almost entirely on field activities, but needs to cover more areas, such as basic epidemiology, risk assessment and risk communication; given that staff recruitment will continue through to 2008, while the disease-specific work will not become a priority until 2010, ECDC needs to ensure that it recruits the right people for the long-term work planned.

15. A number of specific comments were made asking for revision of the document:

- Target 3. “ECDC is the *prime resource* for scientific information and advice on CD for the Commission, the European Parliament, the Member States and their *citizens*” [emphasis added]. It was suggested that ‘prime resource’ be changed to ‘major source’ as the national institutes should remain the prime resource for the general public.
- Annex III. Remove the word ‘acute’ from the ‘Acute respiratory tract infections’ group because TB is a chronic disease.
- Annex III. HPV might better be placed in the STI group, rather than the ‘Vaccine preventable disease’ group.

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- Annex II, target 1. Suggested use of classical measurements as used already in the scientific world, such as impact factors.

16. The Director agreed to take these comments into consideration when reviewing the document.

17. After clarification that a decision was to be taken on the document apart from Annex II, the document was approved by a show of hands with unanimity.

18. A request was made to the secretariat that for future meetings the agenda should specify which decisions required a simple majority and which a two-thirds majority.

Item 5. Report of the Management Board's Working Group (*document MB10/14*)

19. The Chair reported on the outcome of the meetings of the working group.

Management Board processes and working methods

20. Several of their recommendations had already been put into practice. Amendments to the rules of procedure were approved by a show of hands with a clear two-thirds majority.

Information exchange Advisory Forum/Management Board

21. Members were asked to note that a briefing on the technical and scientific work of the Centre would be organized on the day before the start of the December Board meeting. Also, to facilitate exchange of information between AF and MB, the Working Group suggested to the Secretariat to organize a joint meeting of the AF and MB.

Communication channels between ECDC and Member States

22. The working group recommended the appointment by each Member State of an individual to act as a coordination function overseeing all interaction between ECDC and that country.

23. The Director asked members for guidance on the timing of the official request to the Member States for appointment of this individual: whether to wait until after discussion at the December meeting or to go ahead to send letters to members in order that they can coordinate with their ministries.

24. It was felt that further clarification was needed on this coordination function as well as the gatekeeper for scientific questions, and the focal point for labs. Definitions are therefore essential in order that countries can properly decide who to appoint and to ensure a consistency of approach.

25. The Director took the opportunity to clarify the situation:

- The coordination function is at the request of the countries, not a requirement from ECDC. The purpose of this would be to oversee all collaborations between ECDC and the MS. It is an internal matter for each country to decide who, within their own structure, is best placed to fulfill this role. This function exists for most international organizations, and for WHO for example it is carried out by the department for international relations.
- The gatekeeper for scientific questions would ensure that questions put to ECDC are questions of the Member State as stipulated in the Regulation rather than questions of individuals, filtering out matters that are in the national competence, and avoiding duplication and contradictory opinion.
- In addition there would be the focal point for laboratories in the competent bodies to advise ECDC on the collaboration with laboratories, but this is a separate matter.

26. It was further explained that the role of the coordination function is not one of science nor policy per se, but someone who keeps a broad view at the national level of all dealings with ECDC, to ensure that the right information goes to the relevant actors.

27. In reply to further comment from the floor it was agreed that the Director would prepare and present a document for the December meeting setting out the architecture of how ECDC and Member States will interact, clarifying roles and responsibilities, including EWRS.

28. In the meantime, members will receive a letter from the Director asking for the appointment of a coordination function for their country and another letter requesting one laboratory focal point as discussed under item 6 on the agenda. The appointment of gatekeepers for scientific questions would be postponed until after the December meeting, by which time clear terms of reference will have been drafted.

29. Finally, the Working Group briefly discussed the issue of security clearance and it was agreed that the Director would brief the MB on this topic at a future meeting.

Item 6. Strategy proposal for ECDC cooperation with microbiology laboratories and research institutes in the EU *(document MB10/10)*

30. The Head of the Scientific Advice Unit, Johan Giesecke, presented the proposal, as developed following two discussions with the Advisory Forum, and outlining the rationale behind it.

31. Some members felt that the European added value was in mapping and quality assurance initiatives to harmonise standards across the EU. It was suggested that ISO certification could be included in the terms of reference. In response, Johan Giesecke agreed that mapping is important and that it is already part of the work plan.

32. With regard to the organisation of such a system, it will be important to have a coherent approach among the countries. Selection criteria for the focal point are essential to ensure all MS take the same approach. There was a call to confirm that only one focal point will be put forward from each MS, otherwise some countries will have problems justifying why others have more.

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33. The representative of the EC agreed with comments made so far. Perhaps it would be more beneficial to simply map European lab capacity and concentrate on gaps in the MS competence. Cost and sustainability are important issues. As certification and quality assurance exist already in the MS, how will ECDC add value? If there is to be a meeting in the autumn, then the Commission will feed in the experience of other sectors. The Commission is not against the proposal as such but there are still a lot of questions to be resolved.

34. Concrete examples were called for to illustrate ECDC's need for laboratories. It was explained that common diseases (e.g. Salmonella) need networks of labs to work towards harmonisation, whereas an expert centre is required for a disease like SARS in order that one lab keeps up their competence.

35. The Director clarified that there are two parts to this proposal. The first is that ECDC needs lab support in order to deliver activities that are in the work plan and have already been agreed by the Board.

36. The second part concerns the long-term vision and the best way for ECDC to interact with laboratories, and improve capacity and quality assurance. This strategy is still a work in progress and is not before the Board for approval. The opinion of the AF is that ECDC has to start interacting with labs now before work goes any further – it is important to get buy-in from labs for ECDC's strategy. It was therefore agreed with the AF to organize a meeting of the laboratory focal points (as soon as they are appointed by the MS's) and discuss these issues further.

37. The one thing that does need action from the Board is the list of focal points as only a few countries have so far specified someone.

38. One member was concerned about calls for tender being launched before the next meeting, and asked for confirmation of whether or not this would happen in order to be prepared to stem the resulting confusion within the country. Andrea Ammon, Head of the Surveillance Unit, explained that as the issue is linked to the transfer of the DSNs it would not be possible to wait until after the next MB meeting, so potentially there could be a call for tender before then, however, it will be kept to a minimum. Also activities specified in the work plans for 2007 and approved by the MB would continue.

39. The chair acknowledged the reservations of the members. This is clearly a sensitive issue and very complex. The issue will be further developed and revisited in December.

Item 7. Compilation and publication of the list of competent bodies

(document MB10/6)

40. The Director presented the proposal for the compilation and the publication of Competent Bodies (CB) by the MB, following the discussions of the 9th MB meeting, as well as the future steps to be taken with the list (included in document MB10/6). Around 120 institutions are included, although most countries still lack the designation of reference laboratories. After corrections and confirmation that the CBs are informed of their nomination, the list will be published on ECDC website.

41. The Director highlighted further issues to be solved:
- Nomination of a coordinating function in each country and decision by each country if it integrates the gatekeeper function for scientific questions or separates it from the coordinating function.
 - Collection of areas where formal consultation is needed with the MS.
 - Agreement on the level of correspondence within the ministry of health.
 - ECDC will present a paper on “ECDC’s architecture” at the meeting in December 2007 or March 2008.
42. During the discussion, request for further revisions of this list and a thorough periodical review of how it has worked were made by MB members. The possible confusion regarding tasks of the coordinating function and the gatekeeper was also addressed. Furthermore, it was highlighted that some countries have appointed several CB while others have only few. Therefore, a harmonization of the list is needed in order to guarantee that it is in line with ECDC’s needs. One member pointed out that it is the MS responsibility to shorten their corresponding CBs and assess which institution is to assume a coordinating function.
43. Difficulties encountered by some MS to appoint reference laboratories were also mentioned.
44. The representative of the EC commented on the differences in numbers of appointed institutions, as this could be caused either by a methodological problem or by each country’s specificities. It would be practical to have one body per country assuming the general coordinating function. He also reminded the members of the MB that art. 14 (c) of ECDC’s founding Regulation calls for making the list public.
45. The Chair stated that as the issue of nominations had already been discussed in previous MB meetings, agreement had been reached already on having one to maximum four appointed institutions per country. Therefore, it was proposed to take a decision on the current list and review it in one year in order to assess its practicality.
46. The Director informed that the list will be reviewed before it is published and acknowledged that more effort is needed to solve the list’s heterogeneity, as this is a work in progress. But a decision is needed at this stage, as a meeting is planned to be held in autumn with the CBs. The list would then be reviewed again after one year. She also explained that the list’s heterogeneous nature is due to country specificities, as internal complexities need to be taken into account.
47. The Chair asked the Board for approval of the list, to be updated at the MB meeting in December and with each country being responsible for restricting the corresponding CBs. This was approved by majority voting.
48. The Director assured the Board that ECDC could offer assistance to countries in the streamlining of the list. To facilitate next steps, ECDC will write a letter to the MB members clarifying what the ECDC is expecting regarding the nomination of the coordination function and the microbiology focal point.

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Item 8. ECDC language regime (*document MB10/12*)

49. The Chair presented for voting by the MB five proposals, indicating that unanimity is required for each issue to be approved. The issues presented for decision were:

- a) The meetings of the AF will be held only in English. This was approved unanimously.
- b) Paper publications by ECDC and information on the website for which the primary audience is experts and public health officials will be published only in English. This was approved unanimously.
- c) Information brochures and static website information for which the primary audience is the general public will be published in all EU official languages plus Icelandic and Norwegian. This was approved unanimously.
- d) For the Management Board, the language regime is proposed to be with three active languages (English, French and German), with up to three passive languages offered on the basis of need. Four representatives voted against this proposal.
- e) The meetings of the MB will be held only in English. Five representatives voted against this proposal.

50. Following this voting, the Chair requested the Director to address the MB with practical information on infrastructure for translation in the new ECDC MB meeting room. The Director explained that the room contains facilities for interpretation for 3 active and up to 3 passive languages. The arrangement done in the previous MB meeting (March 2007) with an additional mobile interpretation booth to allow for active interpretation of 4 languages can no longer be implemented, as this booth contravened the EC's strict rules on interpretation equipment.

51. The vice-Chair acknowledged the sensitivities that this discussion raises, but cost and technical arguments need to be taken into account when taking a decision. Therefore, having one language is a solution, but if having more languages is possible the questions that arises is by which criteria it was decided that MB meetings would have as additional languages German, French and Spanish. It became practice but was never subject to decision. She then cautioned that the right to equality needs to be preserved. Therefore, she suggested having English as the language for all meetings, as all MB documents are in this language, and if it is possible to have two more on a rotation basis to ensure equality. Meanwhile, a decision by majority is needed on an interim solution until a final unanimous decision is reached regarding the language policy for MB meetings.

52. Different opinions were expressed by members of the Board on the language policy for the MB meetings. Some advocate for the continuation of using other languages because even though documents are in English, discussion is facilitated when interpretation is available. Also, multilingualism needs to be respected, as it is done in other international organizations and EU agencies.

53. Other members of the Board argued that as technical and cost issues need to be taken into account, using only English should be envisioned. A rotation of other languages will not have a major effect, since each country will have to wait a long time for its language to be in

the turn for interpretation. Additionally, it was expressed that all members who are not working in their native language face the same challenges during discussions.

54. Another suggestion put forward was to use only English as an interim solution for the next meeting while the pros and cons of having three other languages are assessed. This proposition was not voted, as requests from the floor for further discussions and clarifications were made.

55. The issue on the practice established since the first MB meetings with the four languages was then discussed. Legal advice was requested as to what decision, if any, led to this practice. Clarification was also requested on financial arguments for raising considerations on the interpretation's cost.

56. The Director clarified that the use of the four languages was never decided formally, it became practice. She also presented some figures on how costs rise according to the increase in the number of languages to be interpreted. She called attention to the reply that the EU Commissioner for multilingualism, Mr. Leonard Orban, sent to ECDC following the requests made during the December 2006 MB. This reply is to be found in the document MB10/12 corresponding to this agenda item.

57. The representative of the EC highlighted the fact that at this meeting already decisions were made on the language regime for three areas. For the issue of language for the MB meetings, the EC will assess with its legal services what the situation is on established practices, taking into account the legal principle of acquired rights and expectations and will report back to the MB. The practice of having the four languages could create legitimate expectations among members of the Board and this needs to be considered in the analysis.

58. As no decision was reached, the Board will continue with the current practice in the next MB meeting. It was emphasized that this was not a decision.

Item 9. ECDC internal rules (*document MB10/11*)

59. The Head of the Administration Unit, Jef Maes, presented four items for the Board's consideration.

- Item 1: Definition of the Centre's internal rules, which was approved by a show of hands.
- Item 2: Code of good administrative behaviour, which was adopted by a show of hands.
- Item 3: Decision to give authority to the Director to adopt implementing rules regarding staff regulations, which was adopted by a show of hands.
- Item 4: The position on adoption of revisions to the Centre's financial rules. The Board agreed not to change the current situation.

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Item 10. Future Annual Epidemiological Reports and proposed content and timeline for the 2006 report (*document MB10/8*)

60. Andrea Ammon presented a summary of the lessons learned while producing the 2005 report and asked the Board for their input on the proposed timetable, and proposals for future years.

61. There was general acceptance that a full report cannot be produced every year. As to whether it should be published every three or five years, opinion was divided. Some members felt that if waiting five years was necessary to have solved all the problems with comparability of data, then it was better to wait. Others felt that for ECDC's visibility and in order to show improvement, five years would be too long and therefore the next full report should be for 2008.

62. All agreed that quality was important and that the main problem was in the comparability of the data. This must be improved for the next report and this can only be achieved if MS agree on the methodology.

63. The danger of using ranking was highlighted and the importance of comparability of data was stressed. Clear figures must be used to minimize misinterpretation.

64. The idea of publishing subject-specific interim reports was welcomed and some suggestions for possible topics were made:

- Hepatitis (A, B and C)
- Antimicrobial resistance
- patient safety (healthcare-related infections)

65. More general suggestions were made such as looking at the needs of the Member States, linking to conferences at EU level, and taking suggestions from the Advisory Forum.

66. Concern was expressed over the proposed timetable. Given that TESSy is new there will inevitably be problems uploading data the first time and this needs to be taken into account in setting a realistic schedule. Andrea Ammon agreed to revise the timetable.

67. Following the discussion it was proposed to aim to publish the next full report within three years, but to review the feasibility after two years. Between the full reports, shorter subject-oriented reports would be published with the advice of the Advisory Forum. In addition, an emerging threat report would be produced, the annual reports from the networks (e.g. on TB) would continue, and TESSy would provide updates on trends.

68. This approach was agreed.

Item 11. ECDC public health emergency plan (*Document MB10/16*)

69. Denis Coulombier, Head of the Preparedness and Response Unit, briefed the MB on the ECDC Public health Event Operations Plan, gave an update on the status of implementation

of the ECDC Emergency Operations Centre (EOC), and summarized lessons learnt during the internal exercise “Brown Lagoon”.

70. The Chair suggested that during the next MB meeting in Stockholm the members of the Board visit the EOC. Denis Coulombier agreed to this.

71. During the discussion, one member of the Board requested clarification regarding the possibility of ECDC running exercises with MS and partners. Another member highlighted that the EOC constitutes an excellent resource and it is important that the links for communicating with the MS be tested and developed further.

72. In reply to these comments, Denis Coulombier explained that the Centre will develop its internal capacity to run exercises with MS and partners, perhaps not large ones at EU level as the Centre doesn't want to be overambitious, but smaller ones and with the possibility of offering guidance to MS. He also acknowledged that links to the countries need to be tested. Additionally, it will be interesting to assess the emergency levels and communication channels in place in the different countries.

73. One member of the Board requested that this presentation be made available to the members of the MB on the CIRCA site which was agreed by the Denis Coulombier.

74. Another member of the Board reiterated the importance of each country being aware of the structures and communication channels in place in other MS for dealing with crisis.

Item 12. The external groups of ECDC *(document MB10/13)*

75. Due to time constraints, it was decided to postpone this item until the December meeting.

Item 13. ECDC 2008 Work Programme priorities *(document MB10/9)*

76. The Director presented a preliminary document outlining the priorities for the 2008 work programme, explaining why this had been brought before the Board at this time.

77. The suggestion of bringing approval of the annual work plan forward in the year was welcomed and there was general support for the idea of having a working group look at the details in advance of the final meeting of the year.

78. In addition, it was suggested that advice from the AF in terms of selecting priorities would be useful and one possibility could be to set up a working group comprising members of both bodies.

79. Given the general acceptance for a working group on this subject, detailed comments on the proposed priorities were kept to a minimum. However, a few broad issues were raised:

- Strategies, the multi-annual plan and the budget are all interlinked and the document should reflect this and make it easier to relate the one to the other. This will also help to show the justification for the decisions on what should be the priorities for a given year;
- The European added value must be made clear.

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80. In summary, the usual December meeting would instead be brought forward to the autumn in 2008. The existing working group of the MB agreed to continue, joined by the three chairs of the advisory forum working groups, to discuss the details of the 2008 work plan. Approval (as required by the Founding Regulation) will be sought at the Management Board meeting in December, not through written procedure.

Item 14. ESANReP project user requirement survey for the development of the ECDC epidemic intelligence information system (EPIS) (document MB10/17)

81. The Head of the Preparedness and Response Unit, Denis Coulombier, outlined the project for the Board's information.

82. In response to comments from the members, he clarified that the concerns of the Member States had already been discussed in the EWRS meeting (which also includes WHO) and have been taken into account. He agreed that there is a rather artificial separation between risk assessment and risk management in the event of an outbreak, which is the reason for the 'ad hoc fora' where prompt decisions can be taken together. The idea is to pull together the activities that are already being done, rather than creating a whole new structure, and to provide a flexible tool for communication.

Item 15. Director's briefing on ECDC's work progress

83. The Director thanked Austria for hosting the MB meeting and expressed a special welcome to the representatives of Lichtenstein and Bulgaria.

84. An update of the most relevant activities performed by ECDC since the previous MB meeting in March was then presented in chronological order. The MB was informed that, after the success of the World TB Day scientific seminar at the European Parliament on 22 March, a similar event will take place in October, also in the EP, in order to launch an "AMR Day". It was also informed that a special report will be produced as follow up of the workshop on the impact of environmental change on communicable diseases held on 29-30 March at ECDC.

85. Numerous other activities were highlighted and information on the finalization of the Annual Epidemiological Report on Communicable Diseases in Europe (EPI report) was then presented. The Director invited the members of the MB to actively promote the report in their respective countries. A briefing on the issues discussed at the 10th Advisory Forum followed.

86. Then an update of the main activities performed by ECDC's different Units was presented. As there are always numerous activities to report, the Director informed that during the meeting of the MB Working Group it was suggested that a briefing could be scheduled in the next MB meeting in order to give members a full overview on all the Units' activities.

87. ECDC's activities regarding the recent case of an airline traveler with XDR-TB were briefly explained. It was highlighted how this case revealed the need for ECDC and the US and Canadian CDC to review the scientific evidence regarding control measures in order to avoid conflicting messages.

88. After the presentation, the Chair asked the representative from Sweden to brief the MB on progress made on ECDC's Seat agreement. Sweden's representative reassured that the Government is making all possible efforts to guarantee good living conditions for ECDC staff. It is aware of the inconveniences that the lack of a proper Swedish ID number causes when contracting services with private companies or requiring healthcare services, because the IT systems reject the ID card numbers given to ECDC staff. It was informed that all ministries involved are aware of this situation and are working on a "fast-track" solution. This has taken time due to the fact that the Swedish ID numbers are linked to the country's tax system, and legal as well as technical matters need to be considered. A solution will also need the approval of the Swedish Parliament. A timetable on the progress will be provided to the MB during the Summer.

89. Before opening the floor for discussion, the Chair took the opportunity to congratulate ECDC staff involved in the publication of the Annual Epidemiological Report on Communicable Diseases in Europe, especially Andrea Ammon, Head of the Surveillance Unit.

90. During the discussion, some members of the MB commented on the situation of the Seat agreement. The efforts to solve this were acknowledged, but results are needed urgently because specific problems have already occurred with staff needing healthcare. It was suggested that the Chair writes a letter to the Swedish ministries involved to express the wishes and expectations of the MB and the need for a clear timetable for a solution. Questions on this problem could also be raised at the EP. Another member cautioned that this situation could even raise a problematic political discussion. The vice-Chair indicated that legal advice is needed in order to assess which actions would be taken in the event something happened to any staff member; also, until the Seat agreement issue is not solved, it needed to be explored if ECDC could cover any expenses.

91. In reply to these comments, the representative of Sweden clarified that there is no denial of health care to ECDC staff, this has generally worked well and a solution should not focus on single cases, but be comprehensive in order to overcome the different difficulties caused by the lack of the proper ID number. On the idea of the letter, she cautioned that sensitivities as well as the fact that a solution is underway need to be taken into account.

92. The Director commented on this discussion, reassuring that progress is being made in Sweden and consultations continue. The solution takes time; therefore an interim arrangement is needed especially for the health care situation, which is a cause of great concern. It was clarified that staff is covered under the EC Joint Sickness Insurance Scheme and no other alternative outside this coverage could be envisioned, but one practical solution could be to contract a general practitioner's consulting room or alternatively to invite one to ECDC and consider how ECDC could cover the costs; this could perhaps also solve the problem of a significant price difference between what the Insurance reimburses and the actual cost of consulting a GP in Sweden is. She then thanked the representative of Sweden for all the efforts underway.

93. The vice-Chair added the request that a letter be sent to the EC's legal services in order to receive advice, so that the Centre has a solution in place for any problem regarding this matter that might occur to ECDC staff.

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94. One member highlighted that the comprehensive report on ECDC activities presented by the Director shows the Centre's essential role as a partner of the MS in the fulfillment of their health strategies. Regarding the activities presented, this member requested that the complex database that the Centre is preparing be kept practical; some flowcharts indicate a separation between the science partners and the health authorities, but integration and networking between these two areas is needed. Furthermore, this member highlighted that whenever ECDC presents scientific projects, as public health authorities have financial pressures, it is important for the countries to know the costs and benefits, in order to be able to assess economic justifications. The Director reassured that work is progressing on the preparation of practical databases, also for epidemiologists and public health workers. It was reassured that there is no separation between tasks and strategic issues, but ECDC remains in its mandate, not entering into policy issues and respecting the competences of the MS and EC. The importance of taking into account the financial pressures countries face was acknowledged by the Director.

95. The briefing of the Director was welcomed by the Board and she was thanked and congratulated on the good progress made. Comments were expressed by some members of the Board on the comprehensive briefing by the Director. It was acknowledged that it reflected the many activities of ECDC, but as it offers extensive information, it is not easy to digest. It was suggested that in future it should focus on strategic issues, on positive results achieved as well as problems and difficulties encountered, in order to get the input from the MB on how to address these.

96. In relation to this, the representative of the EC recommended to keep the MB updated on ECDC's activities through a newsletter, for example a monthly electronic version.

97. Regarding this discussion, the Director highlighted that as the Centre is accountable to the MB, and takes this accountability seriously. This body needs to be kept informed on all activities. She acknowledged, however, that future briefings could concentrate more on results and difficulties as well as strategic issues. She recommended, however, a prior briefing before the MB meetings to provide the Board with all the information needed. The "Annual Report of the Director" is another example of accountability. A newsletter was already produced once last year, and feedback was requested from the MB but no comments were received. This initiative could be restarted, to brief on operational issues so as to allow for the discussion of strategic issues during this agenda item in future MB meetings. The Director proposed that for future presentations of the work done, the focus will be on strategic issues and results.

98. A comment was made on the EPI report, suggesting to discuss further how the countries can optimize the set of data. The Director acknowledged that improvement is needed on the standardization of the surveillance system data.

99. The representative from Germany informed that he had written a letter to the Director asking for clarification on the role of the Centre on vaccination policy, as this is a matter that needs to be discussed jointly with the EC and with MS to assess what is expected and accepted. The vice-Chair agreed on the importance of ECDC's advice on vaccination issues. The representative of the EC explained that the issue is addressed in the annual work plan and three assessments have been requested to ECDC: childhood, influenza and HPV vaccination. He then acknowledged that more policy-oriented information on the future of these issues is

needed, but as the matter requires more preparation, this should be discussed among a group of experts, with the MB Working Group, EC and MS.

100. The Director clarified the role of ECDC on vaccination issues. The Centre is responding to the 3 questions forwarded by the EC and assessing the scientific evidence, but it has no policy role, this is the remit of the EC and the Council. The vice-Chair then asked if an answer to the request for scientific opinion is made available to all countries. The Director explained that all replies are published on the website in order to make ECDC's scientific advice available to all MS.

101. The representative from Germany emphasized that this discussion shows the importance of further assessing this issue, as a division of the specific roles is difficult to evaluate and clarification is needed even if it appears to be a conflicting matter. In reply to this, the Director informed that the discussion on vaccination policy could be included in the agenda of a next MB meeting, possibly for December.

102. The representative of the UK requested further information and discussion on the strategic approach regarding the Disease Specific Networks (DSN). The Director explained that in 2005 the medium term strategy was presented to the MB and was discussed in the Advisory Forum (AF). In addition, the evaluation and assessment of the DSNs is underway with the agreed upon methodology. ECDC attend the meetings of the DSNs regularly to familiarize itself with the work. A transition of 2 years was ensured through contracts by analogy. A case by case decision is taken on the future of each DSN with some basic principles in place: to build consensus with the hubs and MS's, develop a transition plan, integrate only those DSNs where ECDC can ensure the same quality of work. She discusses these issues with the MS's during her official visits, e.g. recently in the UK Department of health. In 2005 it was recommended to integrate first the outbreak related DSNs. The time is adequate now to finalize these discussions and agree on the future of these hubs.

Item 16. First budget amendment 2007 (*document MB10/15*)

103. The Head of the Administration Unit, Jef Maes, briefed the Board on the amendment to the 2007, representing a budget transfer between titles I and 2 amounting to approx. 3,3%.

Item 17. Other matters

Monitoring and reporting on food-borne diseases and zoonoses

104. The representative from the EC John Ryan informed that he was requested to raise this matter in the MB meeting due to the importance of strengthening coordination between EFSA and ECDC, in order to avoid overlaps between both agencies. He also informed of differences in the transatlantic comparisons by both institutions.

105. Andrea Ammon, Head of the Surveillance Unit, acknowledged the EC's concerns and informed that a meeting is planned with the EC soon in order to discuss this matter further. The working relationship with EFSA has been ongoing for two years and the "lessons to learn" have been assessed. She also explained some of the reasons that could be leading to

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differences in the transatlantic comparison. The representative of the EC, John Ryan, expressed his satisfaction with these replies.

Update on ECDC Seat agreement with Sweden

106. Taking into account the previous discussions of this issue during the MB meeting (see paragraphs 90-93) the Director informed that ECDC will explore all possibilities for the best health care solution in the meantime and until a final decision is reached. The Centre will assess how and what costs could be paid from its own budget.

Update on ECDC collaboration with the WHO Regional Office for Europe (*Document MB10/18*)

107. Arun Nanda, WHO Liaison and Adviser to the Director, briefed the MB on the ongoing collaboration between ECDC and WHO. During his presentation, activities performed and achievements were highlighted, and the cooperation plan for 2007 was described.

108. One member of the Board stressed the importance of this collaboration for Member States and the Board was pleased to see the positive progress described to date and looked forward to this continuing given their high expectations also for the future.

109. Finally, before closing the 10th MB meeting, the Chair called attention to the floor on the fact that countries can start to inform the Secretariat by email if they are interested in hosting next year's June MB meeting. On behalf of the Board, he reiterated his warm thanks to Austria for hosting this meeting in Vienna.