ECDC CORPORATE

ECDC international relations policy (2014–2020)
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Abbreviations

DG SANCO  Directorate General for Health and Consumers
ENP      European Neighbourhood Policy
ENPI     European Neighbourhood and Partnership Instrument
IPA      Instrument of Pre-Accession
1 Background

Unlike in most areas of public health, the epidemiological situation of communicable diseases in one country can also have an important impact on other countries. Major public health threats related to communicable diseases are global, impacting upon several countries and all sectors of the economy. Effectively addressing these threats calls for coordinated international response.

This is reflected in the Founding Regulation of the European Centre for Disease Prevention and Control (ECDC)\(^1\), which provides a clear mandate to ECDC to act beyond the borders of the European Union (EU) in situations where communicable disease outbreaks may threaten the health of EU citizens. It lays down the foundation for ECDC’s collaboration with third countries by giving ECDC the mandate to act on its own initiative in response to an ‘outbreak of illness of unknown origin which may spread within or to the Community’ (Article 3). It further specifies that ECDC may be requested by a third country to provide scientific or technical assistance in any field within its mission (Article 9). It finally calls upon ECDC to develop ‘close cooperation with the competent bodies of third countries, the World Health Organisation and other international organisations’ (Article 11) to collect data and to ‘be open to the participation of countries which have concluded agreements with the Community by virtue of which they have adopted and apply legislation of equivalent effect to Community legislation’ in the field of communicable diseases (Article 30).

The aim of this document is to provide a coherent framework for action and priority setting to support ECDC in achieving this objective in accordance with this mandate and the overall EU objective of strengthening its role as a global health player. Set in the context of the ECDC Strategic Multi-Annual Programme\(^2\) (SMAP) 2014–2020, this document builds upon the 2010 ECDC policy for collaboration with third countries\(^3\) and international cooperation activities conducted by ECDC during the 2007–2013 multi-annual work programme and relevant EU policy priorities.

While the new Decision on serious cross-border threats to health\(^4\) assigns new tasks to ECDC, especially in the area of preparedness, it does not affect its mandate and the remit of its activities. As such, ECDC’s founding regulation and its current mandate on communicable diseases and outbreaks of unknown origin remain the reference point for developing this ECDC International Relations Policy (2014–2020).

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\(^3\) Document MB20/12: ECDC Draft policy for collaboration with ‘third’ countries

2 Stocktaking and remaining challenges

The 2007–2013 ECDC SMA\(^5\) set as objective that ‘by 2013, ECDC [...] enjoys a close partnership with the World Health Organization and other selected partners at regional and global levels’. However, several challenges were identified in pursuing this objective:

- The limited capacity and resources of ECDC to meet the growing demand for technical cooperation from non-EU countries and institutions.
- The lack of procedures, requirements and conditions with regard to future partner countries, which will have to be met in order to enable their effective participation in ECDC work.
- The lack of procedures ensuring internal coherence and cost effectiveness of actions.
- The demand for practical programmes which meet the immediate needs of the countries, for example, the accurate implementation of the EU _acquis_ and EU standards, addressing institutional capacity development.
- The need for efficient arrangements for collaboration with all relevant services of the European Commission in close collaboration with the Directorate General for Health and Consumers (DG SANCO).
- The need for strategic guidance regarding collaboration with the World Health Organization (WHO) and its Regional Office for Europe (WHO/Europe) in order to establish technical procedures for collaboration.

ECDC initiated several activities to achieve the above objective and address the related challenges with particular focus on:

- mainstreaming ECDC activities with third countries;
- enhancing cooperation with the EU enlargement countries and developing relations with countries covered by the European Neighbourhood Policy (ENP); and
- enhancing relations with key strategic partners (e.g. WHO/Europe and the US Centers for Disease Control and Prevention).

This was successfully achieved through the implementation of a wide range of activities and projects. The 2010 ECDC policy for collaboration with third countries effectively established priority settings and a framework for ECDC’s day-to-day work with countries outside the EU. This contributed to establishing and streamlining ECDC activities with third countries in accordance with EU policies and priorities.

The implementation of the ECDC policy for collaboration with third countries, including the ‘ECDC roadmap for enhanced cooperation with EU candidate and potential candidate countries’ and technical cooperation projects funded under the Instrument of Pre-Accession (IPA), contributed to enhancing ECDC technical cooperation with EU enlargement countries. Those projects – in addition to the official nomination of national ECDC correspondents in EU enlargement countries and the establishment of communication channels – ensured that these partners were integrated in ECDC activities. ECDC supported the participation of experts from EU enlargement countries in regular technical meetings, capacity building activities and workshops. ECDC experts also visited these countries.

ECDC further supported the European Commission in assessing the progress of EU enlargement countries in implementing the _EU acquis_ on communicable diseases and developed an assessment package. The latter consists of an overall framework for assessing a country’s public health capacity, health governance, surveillance, and preparedness and response in the field of communicable diseases. This assessment framework was pilot-tested in Croatia in 2012 and further implemented during assessment visits to several EU enlargement countries.

Similarly, ECDC initiated collaboration with ENP countries through, for instance, a multi-country workshop on the _EU acquis_ in the area of communicable disease. In 2012, ECDC and the Israel Center for Disease Control signed an administrative arrangement. In addition, ECDC contributed to the EpiSouth and EpiNorth networks and supported capacity building activities in the European Neighbourhood area through the development of MEDIPiET – a training programme based on the model established by the European Programme for Intervention Epidemiology Training.

Collaboration with WHO/Europe was reinforced in 2011 through the renewal of an administrative agreement establishing a framework for technical cooperation, joint activities and coordination, and the establishment of a Joint Coordination Group. Collaboration with peer institutions in other countries was developed through the signature of memoranda of understanding with the Chinese Centre for Disease Control and Prevention, the US Centers for Disease Control and Prevention, and the Public Health Agency of Canada. ECDC also participated and supported the European Commission in its bilateral dialogue with key strategic partners (e.g. Russia, China, and the USA) and regional public health fora. For example, ECDC supported the EU-Russia Health Dialogue, the Northern Dimension Partnership in Public Health and Social Well-being, and the South-Eastern European Health Network.

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Despite those achievements, some challenges remain and need to be further addressed in the context of the ECDC International Relations Policy (2014–2020). These include:

- Limitations of ECDC capacity and resources make international cooperation difficult vis-à-vis the growing demand from non-EU countries and institutions.
- Support for the participation of EU enlargement countries in ECDC surveillance activities through the development of relevant procedures.
- Enhanced technical cooperation with European Neighbourhood Policy countries and their participation in ECDC activities through the development of procedures, tools and contacts.
- Further development and assessment of added value and effectiveness of existing procedures and administrative arrangements in international cooperation to ensure internal coherence and cost effectiveness of actions.
- Provision of further support and guidance to the ECDC staff on the EU health priorities and policy setting in international relations.
3 Principles for collaboration

International Relations at ECDC cover bilateral work with national institutes of countries outside the EU and European Economic Area (EEA), as well as cooperation with international organisations, regional/multilateral platforms and non-governmental stakeholders. The role of the International Relations section is to promote a coherent corporate approach across ECDC towards international relations and provide a framework to support and facilitate technical cooperation between EU and non-EU experts.

In developing collaboration with its partners, ECDC takes into account:

- the objectives of relevant EU policies;
- the current status of relations between the EU and the given partner; and
- the partner's public health/communicable disease impact to EU and global health.

In addition to the EU external policy framework and health policy priorities, ECDC considers the following factors when setting the priorities for working with partners in non-EU countries:

- Geography: neighbouring countries with increasing cross-border interactions with the EU towards interoperability in health security.
- Public health/disease epidemiology needs: particular focus on diseases with a high potential for cross-border spread, both globally and regionally.
- Cost-efficiency and added value of actions taken.

Taking those criteria and factors into consideration, the proposed priority settings for the ECDC International Relations Policy (2014–2020) can be represented as follows:
4 Visions for 2020

In accordance with the 2014–2020 SMAP, this International Relations Policy (2014–2020) relies on a vision which states that by 2020:

- ECDC is a highly-respected reference partner at international level in the field of prevention and control of communicable diseases;
- ECDC works closely and effectively with its counterpart institutes outside the EU and other key stakeholders in a well-coordinated and complementary manner.

5 Strategic objectives

This vision and the overall ECDC International Relations Policy (2014–2020) are underpinned by a set of specific objectives.

5.1 EU enlargement countries

**Strategic objective 1**

By 2020, the capacities of EU enlargement countries for the prevention and control of communicable diseases and their progress in terms of implementation of EU acquis have been assessed.

In addition, the implementation of technical collaboration action plans with ECDC has been initiated – with a view to progressively increase the involvement of these countries in ECDC activities, systems and networks, and their participation in ECDC activities as observers or full participants.

Strengthening the capabilities of EU enlargement countries towards the implementation of the *EU acquis* on communicable disease in the overall context of the EU enlargement process remains a priority. In this respect, ECDC will continue to provide technical support to the European Commission by assessing existing capabilities and measuring the progress made by these countries in terms of implementation of the *EU acquis*. This implies significant investments from ECDC up to the year 2020 in order to update its assessment tool (while taking into account legislative developments in this field), carry out technical country assessments, and establish sustainable cooperation and support structures.

The participation of EU enlargement countries in the activities of EU agencies contributes also to the objective of familiarising these countries with the *EU acquis*. In this respect, supporting their participation in ECDC activities, taking into account their respective circumstances and constraints, will be a priority of this ECDC International Relations Policy (2014–2020).

To this end, ECDC will build upon existing activities with these countries and the finalisation of the IPA project in 2014 that will put in place the necessary technical links for cooperation, such as the access to information exchange systems including access to ECDC IT tools (e.g. TESSy and EPIS). In particular, ECDC will continue to provide technical assistance to these countries, organise training and information activities (seminars, workshops, conferences), and conduct country visits on mutually agreed thematic areas within the remit of ECDC. Progress in preparatory development will be monitored by documenting the degree of involvement of EU enlargement countries in ECDC activities through reports on events and on the implementation of pre-accession assistance activities.

In addition, ECDC will initiate the implementation of action plans on technical collaboration for EU enlargement countries. Based on the results of country assessments and in coordination with DG SANCO, ECDC will provide advice to these countries and offer assistance in developing and implementing country-specific action plans – within its remit and resources – to strengthen their communicable disease prevention and control systems. Reports from assessment missions together with progress reports on the implementation of these action plans will testify on the ability of EU enlargement countries to participate in ECDC work. These activities will gradually increase involvement in ECDC work and prepare EU enlargement countries for their participation as observers in most of ECDC activities.

Finally, ECDC will continue to further develop and implement the strategy on progressive integration of EU enlargement countries into the EU surveillance activities in accordance with their existing capabilities.
Major milestones are summarised below:

<table>
<thead>
<tr>
<th>First quarter 2014</th>
<th>Second quarter 2015</th>
<th>Third quarter 2016</th>
<th>Third quarter 2018</th>
<th>Fourth quarter 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last 2014 Work Plan for IPA-3 project finalised, experts designated for continuing technical cooperation with enlargement countries</td>
<td>ECDC-IPA-3 technical assistance project completed and reported to Commission</td>
<td>Policy and action plan on engaging the EU enlargement countries in EU-level surveillance activities. Country C 2016 assessed, technical assessment report submitted to EC, and technical action plan proposed</td>
<td>Country E 2018 assessed, technical assessment report submitted to EC, and technical action plan proposed</td>
<td>All EU enlargement countries have cleared initial assessment of country capacity</td>
</tr>
<tr>
<td>1 Jan 2014</td>
<td>31 Dec 2020</td>
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</tbody>
</table>

### 5.2 European Neighbourhood Policy countries

#### Strategic objective 2

By 2020, ECDC has a set of well-established/sustainable procedures in place. ECDC has tools available for technical cooperation with ENP countries and established contacts for cooperation. All activities fall within the wider framework of the agreements in place between the EU and these countries and will support approximation of EU standards in the field of communicable disease prevention and control, and ensure the efficient and timely technical cooperation between EU and ENP experts.

In certain, yet to be determined areas, joint activities involving ENP countries and EU Member States should be conducted in a seamless manner.

The selective and gradual participation of ENP partners in the work of EU agencies is a key objective of the European Neighbourhood Policy.

In accordance with this priority (and based on the previous activities with ENP partners, notably in the context of EpiSouth), ECDC's cooperation with ENP countries will aim at supporting the overall policy objective of bringing neighbouring countries closer to EU standards through a strengthening of capacities and the approximation of practices and legislation. This cooperation with ENP countries will take into account the specific capacities and the epidemiological situation in partner countries and prioritise cooperation activities that are mutually beneficial to both the ENP partners and the EU. Whenever relevant and feasible, ECDC will favour a regional approach towards cooperation over a series of bilateral initiatives.

This objective will be implemented step by step. In order to set the basis for sustainable technical cooperation, the first priority will be to ensure that appropriate communication channels are established between competent institutions of ENP countries and ECDC. This will be achieved through the identification of contacts in partner countries (i.e. national correspondents).

Activities will focus on the assessment of capacities in ENP countries, the identification of gaps, and areas of mutually beneficial cooperation, accompanied by the development of tools for technical cooperation. These measures will result in the regular participation of ENP countries in jointly identified ECDC activities organised with EU Member States, thereby contributing to:

- familiarise ENP countries with the tools, standards, and practices adopted at a technical level for the fight against communicable diseases in the EU;
- encourage contacts and exchanges of best practices at the technical level between EU Member States, ECDC, and ENP partners; and
- support the strengthening of capacities in the prevention and control of communicable diseases in ENP countries.

This will be achieved at first through the implementation (2014–2015) of an ENP grant supporting preparatory measures for the participation of ENP countries in ECDC activities. The implementation of this grant for cooperation with ENP countries will build on the accomplishments of EpiSouth and provide an opportunity to continue and intensify activities initiated through EpiSouth.

In addition, ECDC will continue its support for the MEDIPIET project – a training programme in intervention epidemiology – during the implementation of its second phase (2014–2017), thus actively promoting capacity building in the Mediterranean region for the prevention and control of natural and man-made threats to health posed by communicable diseases.

However, over the seven-year period covered by the policy, cooperation with ENP countries should move from a time-limited, project-based approach to a self-supported cooperation that by 2020 would result in well-established and sustainable procedures as well as tools and contacts for technical cooperation with ENP countries. These will work towards convergence with EU standards in the field of communicable disease prevention and control and ensure efficient, timely and seamless technical cooperation between the EU and ENP countries.

Major milestones are summarised below:

### 5.3 EU Institutions and bodies, international organisations and multilateral fora

#### Strategic objective 3

By 2020, ECDC has strengthened its capacity and role as an EU technical reference point on issues related to communicable diseases for international and multinational organisations as well as public health players involved in public and global health.

Seeking more effective and efficient ways to work and collaborate with other EU institutions and bodies, international organisations and other key players in the field of communicable diseases is essential to ensure the best use of available resources. Consequently, partnerships with entities active in the field of communicable disease prevention and control at the international level are an important part of the ECDC International Relations Policy (2014–2020).

To achieve this objective requires ECDC to collaborate in a coordinated manner with a range of EU institutions and bodies (e.g. other EU agencies), WHO, United Nations agencies and key stakeholders.
5.3.1 EU institutions and bodies

Within its mandate, and in line with the EU external policies and instruments, ECDC will continue to coordinate its international activities with the European Commission (e.g., DG SANCO) and liaise, when necessary, with other European Commission services; the European External Action Service (EEAS); and the Consumers, Health and Food Executive Agency. Depending on resources, and if requested by the European Commission, ECDC will seek to strengthen its technical participation in the activities of relevant regional platforms and fora and continue to support the European Commission in its international activities, e.g. the EU-Russian Federation Health Dialogue, the Global Health Security Initiative, the Northern Dimension Partnership in Public Health and Social Well-being, and the South-Eastern European Health Network. This could achieve synergies in areas such as the ongoing EU technical assessments of the EU enlargement countries, enhance links to eastern ENP countries, and facilitate work in areas such as antimicrobial resistance and HIV. Technical participation in regional platforms/fora and support of the European Commission would benefit from the experiences ECDC gained by participating in the EpiSouth and EpiNorth projects.

Based on its technical expertise and mandate, ECDC will continue to support response measures to humanitarian crises through existing European Commission structures, for example the Emergency Response Coordination Centre. The planned development of a strategic approach and the related internal procedures for managing requests for assistance with emergency response involving third countries will contribute to reaching this objective.

While procedures for the management for such requests from the Member States have already been established, procedures for the handling of requests from the European Commission, international organisations and third countries have yet to be formalised. The proposed procedure will provide a framework improving internal coherence in managing such requests by mainstreaming organisational and procedural issues.

In addition, ECDC will seek to further develop and intensify the coordination of its activities with other EU agencies in the context of the informal network of EU agencies with Pre-Accession and European Neighbourhood Policy programmes. The objective of this network is to improve cooperation and develop synergies in matters of mutual interest, in particular through sharing experiences, lessons learned and good practices between network coordinators of the agencies. This will be implemented in the context of the existing memoranda of understanding and other administrative arrangements between ECDC and the other EU agencies.

5.3.2 WHO

The Joint Declaration between the European Commission and WHO/EURO including its 'Roadmap for Collaboration on Health Security' will be the framework within which ECDC cooperates with WHO. The 'Roadmap for collaboration on Health Security', which is one of the elements of the cooperation between the European Commission and WHO, sets out priority areas for collaboration and includes ECDC where necessary. These priority areas are: support to the implementation of the International Health Regulations, pandemic and emergency preparedness, HIV/AIDS, tuberculosis, vaccine-preventable diseases, antimicrobial resistance, and general surveillance. ECDC will support the European Commission in the implementation of the 'Roadmap for Collaboration on Health Security' with an adequate focus on general surveillance. In addition, ECDC and WHO/EURO have signed an Administrative Arrangement to help European countries to assess and improve their preparedness and response systems, avoid overlap, and facilitate communication on major public health events.

One of the main areas of work for ECDC will be to clarify the roles and responsibilities regarding surveillance of communicable diseases, particularly in EU enlargement countries. All decisions and procedures should be fully documented, and their implementation should be initiated by 2020. This work will be reviewed and coordinated through the ECDC–WHO/EURO Joint Coordination Group, with DG SANCO as an observer. This Group meets twice a year. Regular progress reports will be presented to the ECDC Management Board. Regarding preparedness and response, ECDC will continue to support WHO-facilitated efforts in deploying technical teams to countries – where appropriate and possible – through the Global Outbreak Alert and Response Network.

5.3.3 Other stakeholders

To achieve this strategic objective within the context of the existing cooperation between the European Commission and these organisations, ECDC will seek to explore possibilities for further collaboration with other organisations and key players in the field of communicable diseases in Europe and internationally. This includes the International Office for Migration; the Global Fund to Fight AIDS, Tuberculosis and Malaria; the Global Alliance for Vaccines and Immunization; and the Bill & Melinda Gates Foundation. Such cooperation would contribute to the best use of available resources through more effective and efficient ways to work and cooperate so as to avoid duplication.
5.4 Organisations in other non-EU countries

**Strategic objective 4**

By 2020, ECDC is a close partner of the major centres for disease prevention and control across the globe, a trusted provider of data and scientific evidence, with the capacity to mobilise EU expertise in order to provide technical support and assistance (e.g. for outbreak investigations).

Building upon existing bilateral collaboration agreements with other centres for disease prevention and control or similar organisations in non-EU countries (e.g. memoranda of understanding with the Public Health Agency of Canada, the US Centers for Disease Control and Prevention, and the Chinese Center for Disease Control and Prevention), ECDC intends to become a close partner of the major CDCs, trusted for its expertise and relied upon for its ability to mobilise EU expertise in order to provide technical support and assistance.

The implementation of bilateral agreements with other CDCs will be systematically monitored and evaluated in order to:

- assess the added value of existing agreements for establishing a framework for cooperation; and
- eventually identify gaps in these agreements or point out the need for either intensified or new cooperation arrangements.

In addition, ECDC will explore the possibility of initiating annual multilateral or bilateral coordination meetings with these partners to identify strategic areas for cooperation and technical collaboration.

Major milestones to achieve this objective are summarised below:

- **First quarter 2015**
  - Sustainable mechanism for outbreak assistance in third countries

- **Second quarter 2015**
  - Meetings for the CDC contact points

- **Fourth quarter 2014**
  - M&F framework for memoranda of understanding

- **Fourth quarter 2015**
  - Procedures for staff secondment to/from other CDCs

- **Fourth quarter 2018**
  - Regular participation of third countries in mutually beneficial disease network meetings and projects
6 Tools and resources

Strong, meaningful and sustainable relationships with partners require consistent personal interactions and a regular exchange of substantive information and intelligence. Establishing such relationships and building mutual confidence requires the investment of considerable time, travel and financial resources, given the geographic location of ECDC headquarters in Stockholm. Therefore, the ECDC International Relations Policy (2014–2020) will be implemented progressively, relying on funding opportunities from EU financial instruments and the ECDC core budget, depending on the available financial and human resources.

Over the past years, activities with EU enlargement countries were implemented through projects funded under IPA. Based on this model, the above-mentioned activities with ENP countries will be implemented through an ENPI (European Neighbourhood and Partnership Instrument) grant, while training activities with Mediterranean partners will be implemented through a service contract funded under the Instrument for Stability. In planning other actions, ECDC will continue seeking support and additional funding opportunities from IPA, the European Neighbourhood Instrument and other EU financial instruments, such as the Technical Assistance and Information Exchange (TAIEX) instrument.

However, part of the activities will continue to be financed from the ECDC core budget, in particular the technical assessment of the EU enlargement countries’ capacities in the field of communicable disease prevention and control.

The present core staff devoted to the coordination of ECDC’s international activities is 4.9 fulltime equivalents (FTE). For the ECDC International Relations Policy (2014–2020), the level of human resources should remain at the present level. The available resource input from ECDC experts will be determined annually, as part of the regular management discussions leading up to the Annual Work Plan.

ECDC funds most operational activities in which non-EU countries participate with grants from the European Commission accessible to EU agencies; ECDC continues to explore their availability (e.g. Instrument for Pre-Accession Assistance, European Neighbourhood Policy Instrument). The technical assessments of EU enlargement countries are financed from the ECDC core budget. The allocation of resources (human and financial) will be carried out in conjunction with regular, (multi-)annual planning sessions.
Monitoring and evaluation framework

The framework for monitoring and evaluating the implementation of this policy will rely on the performance indicator for collaboration with non-EU countries, as approved by the Management Board in the context of the ECDC 2014–2020 Strategic Multi-Annual Programme and subsequent annual Work Programmes. This indicator consists in the completion of an agreed list of joint activities established between ECDC and its international partners, with a target of 90% of successfully implemented activities. It covers a) timely and sustainable support to the Commission and relevant countries in the implementation of EU enlargement and ENP policies, and b) the establishment of working relations with relevant international partners.

Overview of the monitoring and evaluation framework for international relations activities:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Indicator</th>
<th>Target</th>
<th>Verification</th>
</tr>
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<tbody>
<tr>
<td>• Achievement of timely and sustainable support to the Commission and relevant countries in the implementation of EU enlargement and ENP policies</td>
<td>Completion of an agreed list of joint activities established between ECDC and its international partners</td>
<td>• 90% of the activities referred in SMAP successfully finalised by 2020</td>
<td>Review of the list of activities for enlargement/ENP countries and international partners</td>
</tr>
<tr>
<td>• Established and functioning working relations with relevant international partners</td>
<td>• Degree of completion of the list</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This will be further complemented by:

- evidencing the degree of involvement of the international partners in ECDC activities in reports regarding events carried out within the framework of the ECDC International Relations Policy (2014–2020);
- monitoring and evaluating the implementation of the country-specific plans of actions, performed jointly by ECDC and EU enlargement countries;
- assessing the administrative agreements and memoranda of understanding and the level of implementation and added value of the ECDC has signed with international partners.

Progress will be monitored by the ECDC Senior Management Team (SMT), chaired by the ECDC Director, as a periodic agenda item at SMT meetings.

In addition, the implementation of ECDC projects funded through EU financial instruments (e.g. IPA or ENPI grants) will be further monitored through updates and regular progress reports regularly communicated to the European Commission and to the Management Board.