Minutes of the Fifty-third Meeting
24 November 2021 (videoconference)

Adopted by the ECDC Management Board at its Fifty-fourth meeting, 23 March 2022
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Summary of Proceedings – ECDC Management Board Meeting

The Fifty-third meeting of the ECDC Management Board convened on 24 November 2021 as a virtual meeting due to the COVID-19 pandemic. During the meeting the Management Board:

- adopted the programme of the meeting;
- adopted the minutes of the Fifty-second meeting of the Management Board;
- endorsed the IAS Strategic Internal Audit Plan 2022-2024;
- approved the proposed amendment to the ECDC Internal Control Framework;
- approved the ECDC Single Programming Document 2022-2024;
- approved the Budget and Establishment Table 2022;
- approved the ECDC Communication Policy 2022-2027;
- approved the Memoranda of Understanding between ECDC and the UK Health Security Agency and between ECDC and the Korea Disease Control and Prevention Agency;
- approved the proposal on hosting MB55 in France during the French Presidency;
- discussed the ECDC Single Programming Document 2023-2025;
- took note of the update from the ECDC Director including on COVID-19;
- took note of the summary of discussions held at the 47th meeting of the ECDC Audit Committee;
- took note of the Progress report – Overview of 2021 budget implementation;
- took note of the fourth Supplementary and Amending Budget 2021;
- took note of the Report on Implementation of the Work Programme 2021 up until present;
- took note of the annual address of the ECDC Staff Committee to the Management Board;
- took note of the update on the implementation of the ECDC Independence Policy;
- took note of the update from the European Commission;
- took note of the update on the Slovenian EU Presidency
- took note of the update on the French EU Presidency.
Opening and welcome from the Chair (and noting the Representatives)

1. Anni Virolainen-Julkunen, Chair of the ECDC Management Board, welcomed all the participants to the Fifty-third meeting of the Management Board (MB). The meeting convened via video conference. A special welcome was extended to Sigrid Kierrmayr, newly appointed member, Austria; Dirk Wildemeersch, newly appointed alternate, Belgium; Theoklis Zoutis, newly appointed member, Greece; Aggeliki Drelizo, newly appointed alternate, Greece, and Lucia Pauliková, newly appointed alternate, Slovakia.

2. Apologies had been received from Croatia and Estonia.

Welcome from the Director, ECDC

3. Andrea Ammon, Director, ECDC, warmly welcomed the MB members and thanked them for taking the time to participate in the meeting in these busy times. She informed the MB that she would participate in a press briefing arranged by the European Commission the same day and therefore had to leave the MB meeting at 14:00.

Adoption of the draft programme (and noting the declarations of interest and proxy voting, if any) (Document MB53/01 Rev. 1)

4. One MB Member requested an update on the next steps following the Third Joint Strategy Meeting (JSM). She also noted that there was no item on the agenda regarding the extension/selection of the Director and asked whether this point would be addressed during the meeting. It was agreed that the ECDC Director would touch upon the next steps of the JSM during her update to the MB, and that one of the representatives of the European Commission would address the matter of the extension/selection of the Director in his update later during the day.

5. The Draft Programme was then adopted. The Chair asked each member whether s/he wished to add any oral declaration(s) of interest to her/his Annual Declaration of Interest (ADoI) submitted previously. None were declared.

The Management Board adopted the draft programme.

Adoption of the draft minutes of the 52nd meeting of the Management Board (videoconference, 16 June 2021) (Document MB53/02)

6. The Chair noted that the draft minutes of the 52nd meeting had been circulated to the MB ahead of the meeting. A few minor amendments had been requested by the Netherlands (points 20 and 32) and by the Deputy Chair and MB member, European Parliament (point 14). These changes had been taken into account in the version shared with the MB. There were no further comments on the minutes.

The Management Board adopted the minutes of the Fifty-second meeting of the Management Board.

Update from the Director including on COVID-19

7. Andrea Ammon, Director, ECDC, provided an update on the COVID-19 epidemiological situation and vaccine uptake and described the main messages of the latest Rapid Risk Assessment (RRA) published the same day. In summary, the RRA recommended Member States to close immunity gaps in the adult population, urgently consider a booster dose for those 40 years and over, and to introduce or reinforce non-pharmaceutical interventions (NPIs) without delay. The presentation also focused on the targeted country support provided to Member States with a COVID-19 vaccination coverage below the EU average. Between 21 October and 19 November, ECDC had held bilateral discussions with eleven Member States and Director’s missions had taken place in three of these. In the discussions, a number of common issues
were identified. Based on these, some immediate actions for all eleven Member States were agreed. These include for instance a webinar on social media and misinformation taking place end of November and a webinar on community engagement to be held in January 2022.

8. In the discussion that followed, one MB member commented that the indicator on vaccination status of hospitalised persons (vaccinated versus non-vaccinated) was pertinent when the vaccination coverage was not very high; once the vaccination rate was very high the ratio of vaccinated individuals ending up in hospital would increase which meant that this indicator could be interpreted as if vaccination was not efficient. She also noted that the aerosol transmission of COVID-19 seemed to be underestimated as the winter period was approaching and people would be spending more time indoors. Another MB member asked why the RRA recommended to urgently consider booster doses for those 40 years and over and not for those 60 years and above. With reference to her question at the beginning of the meeting, she asked whether an action plan would be produced based on the discussions in the Third Joint Strategy Meeting (JSM). One MB member commented that the RRA did not provide information on the expected effects of the three options for response; the implementation of NPIs would have immediate effects while the booster dose would have a longer-term effect. She felt that it was important to give clear guidance to policy makers on what was the most urgent thing to do. The Deputy Chair and MB Member representing the European Parliament asked if there was an explanation based on analytical data for the low vaccine uptake in the Eastern EU Member States. Another MB member mentioned that in his country the booster dose was anticipated to be given five months after the primary series according to the recommendations of the national medicines’ agency. Lastly, one MB member reported on challenges related to implementing measures in school settings.

9. Responding to the question on JSM, Maarit Kokki, Head of the Executive Office, Director’s Office, ECDC, clarified that it was not planned to prepare an action plan as such but the conclusions from the JSM would be fed into the discussions on the new mandate and these elements would be brought back to the existing bodies (MB, AF, CCB) as relevant.

10. Andrea Ammon thanked for the comments and agreed that the higher the vaccine coverage was the more there will be vaccinated individuals ending up in hospital as well, even if the likelihood of getting hospitalised was still much bigger in the non-vaccinated groups. Concerning the comment on aerosol transmission of COVID-19 she said that the attribution to droplet versus aerosol transmission was very difficult and added that she would go back to the experts in ECDC to see if there was any new evidence in this regard. Concerning the age group for the booster dose, she replied that those aged 40 years and over were a very big group where waning immunity could be observed. Concerning the effects of the three main recommendations in the RRA, she said that from ECDC’s perspective these were not a sequence but were to be implemented in parallel. It was necessary to consider the timeliness of the measures as well; lockdown was of course very effective but very costly for the society so it was preferable to introduce some measures now to avoid very hard measures later. Responding to the question on the low vaccination uptake in Eastern Europe, she mentioned that the lack of trust in authorities was probably a large contributing factor but there were surely also other reasons which could differ from one country to the other. In general, the lack of vaccine acceptance was not a feature of Eastern Europe alone. With reference to the timeframe for the booster dose, she noted that ECDC was following the EMA recommendation of six months after completing the primary series of vaccination. Referring to the comment on school settings, she suggested that colleagues in the COVID-19 “school team” could talk directly to the national experts dealing with this topic. She added that ECDC would shortly publish a technical report on COVID-19 vaccination in children.

The Management Board took note of the update of the ECDC Director.

Summary of discussions held at the 47th meeting of the ECDC Audit Committee (videoconference, 23 November 2021), including its recommendations

11. Johan Carlson, Chair of the Audit Committee, gave a summary of the discussions from the 47th Audit Committee (AC) meeting, which took place on 23 November 2021. He mentioned that the Internal Audit Service (IAS) had presented the results of its limited review of the implementation of the new ECDC Internal Control Framework (ICF). The AC had taken note of the report, the four recommendations raised and the ECDC action plan. Concerning the regular update on audit activities, he mentioned that four new
observations had been received and three had been formally closed by the IAS. Eight observations were currently open, six of which had target dates in Q4 2021, one in Q1 2022, and one in Q2 2022.

The Management Board took note of the summary of discussions held at the 47th meeting of the ECDC Audit Committee.

a) IAS Strategic Internal Audit Plan 2022-2024 (Document MB53/03)

12. Stefan Sepundzhiev, Internal Auditor, IAS, explained that the IAS Strategic Internal Audit Plan (SIAP) 2022-2024 was based on the results of an in-depth risk assessment carried out by the IAS during May-June 2021. The risk assessment identified the following three high-risk areas and audit topics: 1) Information security management; 2) Grant management for implementing HERA Incubator actions; 3) Preparation, review, and validation of external communication content. The SIAP will be subject to an annual review to take into account any important organisational or external developments that may have an impact on the risk profile of ECDC and give rise to an update of the plan.

13. Johan Carlson reported that the AC had discussed the audit topics selected by the IAS and agreed that they were all relevant but that the detailed scope and timing of the audits would be very important. The IAS had confirmed that the Information Security Management audit would be based on the applicable ISO standards and EC standards. The IAS had also explained that the detailed audit scopes will be further discussed closer to the audits. In conclusion, the AC recommended the MB to endorse the SIAP 2022-2024.

The Management Board endorsed the IAS Strategic Internal Audit Plan 2022-2024.

b) Amendment to the ECDC Internal Control Framework (Document MB53/04)

14. Stefan Sundhomb, Internal Control Coordinator, Executive Office, Director’s Office, ECDC, recalled that the MB had approved the ECDC Internal Control Framework (ICF) in November 2019 and the detailed ICF in November 2019. At that time, it was decided to delete characteristic 2.4, as in the ECDC the responsibility for the Annual Activity Report (including Risk Management and Internal Control) was directly under the Director. This also rendered the statement in appendix 2 obsolete. It was further agreed that the ICF would be discussed in the AC in the future, and only in the MB if changes were proposed to the main text (principles and/or characteristics). Following the IAS Limited Review of the Implementation of the new ICF, the Director had decided to delegate the role of Manager in charge of risk management and internal control (RMIC) to the Head of the Executive Office. To reflect this, the following changes to the ICF were now proposed: characteristic 2.2. is amended (replacing ICC with RMIC), characteristic 2.4 is added (clarifying the role of the RMIC), and the declaration to be signed by the RMIC is added in appendix 2 of the ICF.

15. Johan Carlson informed the MB that the AC had taken note of the suggested changes and recommended the MB to approve the proposed amendment to the ECDC Internal Control Framework.

The Management Board approved the amendment to the ECDC Internal Control Framework.

c) Progress report: Overview of 2021 budget implementation (Document MB53/05)

16. Anja Van Brabant, Accounting Officer and Head of Section, Finance and Accounting, Resource Management Services, ECDC, presented an overview of the 2021 budget implementation. She noted that, by 16 November 2021, EUR 154.1 Million were committed from the 2021 budget of EUR 168.1 Million. EUR 0.27 Million were in the workflow to be committed. In terms of executed payments, EUR 95.9 Million had been paid. Concerning carry-forwards (C8) from 2020, EUR 9.4 Million had been paid, corresponding to 70.1% of the total amount of EUR 13.5 Million (C8).

17. Johan Carlson reported that the AC had discussed the budget implementation for 2021. ECDC had confirmed that it had returned EUR 20 Million to the European Commission as part of the global transfer exercise (from budget line 3000), but that EUR 10 Million would be returned to ECDC in 2022. The AC had expressed satisfaction with the budget implementation, given the challenges with the high increase in the budget in 2021.

d) Fourth Supplementary and Amending Budget 2021 (Document MB53/06)

18. Anja Van Brabant presented the Fourth Supplementary and Amending Budget 2021, consisting of the budget transfers approved by the Director since the last MB meeting held in June 2021. The document also displayed the EUR 20 Million returned to the European Commission by the Centre from budget line "3000 - Integrated Surveillance, including Epidemic Intelligence and Microbiology", within the framework of the 2021 Global Transfer exercise conducted by the European Commission (DG BUDG). She clarified that this item was for information.

19. Johan Carlson reported that the AC had discussed the expected implementation of the budget, and ECDC had confirmed that it was expecting to implement 98% of the 2021 budget. The AC had taken note of the transfers made under the responsibility of the Director.

20. One MB member asked for a clarification regarding a transfer made in the previous amending budget and which to her understanding was connected to the new ECDC mandate while this was still being negotiated, and how this related to the return of EUR 20 Million to the Commission versus EUR 10 Million to be returned to ECDC in 2022.

21. Andrea Ammon, Director, ECDC, explained that the earlier budget transfer was not related to the new mandate but concerned tasks seen as necessary in the context of the HERA Incubator.

22. Anja Van Brabant clarified that EUR 106 Million had been added earlier for sequencing support and activities under the HERA grants. Out of this amount, EUR 20 Million had been left over and was therefore transferred back to the Commission but at this occasion ECDC had expressed its wish for 10 Million to be returned in 2022 for continuation of these activities.

The Management Board took note of the Fourth Supplementary and Amending Budget 2021.


23. Maarit Kokki, Head of the Executive Office, Director's Office, ECDC, briefed the MB on the implementation of the work programme 2021 as of 31 October 2021. 71% of the activities were on schedule, 12% were delayed, 7% postponed to 2022 and 10% had not started. These figures included the initial planned SPD outputs and the additional outputs approved in March and May 2021.

24. Johan Carlson mentioned that the AC had taken note of the implementation of the Work Programme 2021 and the fact that there were some delays but concluded that these were understandable given the circumstances.


f) ECDC Single Programming Document 2022-2024

ij) ECDC Single Programming Document 2022 (Document MB53/07 Rev. 1)

25. Andrea Ammon presented the ECDC Single Programming Document 2022 noting that 2022 would be the second year of implementing the ECDC Strategy 2021-2027 and the strategic roadmap. The priority areas for 2022 were: to scale up the level of support to the European Commission and the Member States to strengthen their surveillance; emergency preparedness and response to cross-border health threats including the lessons learnt from the COVID-19 pandemic; to assess and integrate innovation for communicable diseases, including the digitalisation of surveillance system; to increase ECDC knowledge and understanding of the Member States in order to better target interventions, and to address priority conditions and issues at European level, such as AMR, vaccine coverage, the effects of climate change, and support in addressing the Sustainable Development Goals for HIV, TB and hepatitis. She then presented the resource allocation for 2022 per Strategic Objective (SO) and clarified that the FTEs under
SO2 also included the project staff allocated to international projects. 213 comments had been received altogether from the Member States, European Commission, and other key stakeholders; these were listed in the repository of comments shared prior to the meeting.

26. Following the presentation, several MB members inquired how ECDC was going to interact with the European Health Emergency Preparedness and Response Authority (HERA) as this was not indicated in the document. Andrea Ammon responded that the discussions with HERA were ongoing and therefore it was not possible to elaborate further on this matter at this point. However, what ECDC was doing now was to map the different activities and to continue the dialogue with HERA on either separating or commonly addressing specific topics. ECDC also had a representative in the HERA Board and would look at ways of developing a more structured dialogue through an agreement or Memorandum of Understanding.

27. One MB member welcomed the activities related to the lessons learnt from the pandemic but added that the crisis was not over and asked whether ECDC was planning to produce any guidance on how to deal with the next stage of the pandemic where countries will enter an endemic phase of COVID-19. Andrea Ammon agreed that guidance on how to deal with this situation from the point of view of the health care systems, etc., would surely be welcome keeping in mind though that the care structures differed from one Member State to the other.


ii) Budget and Establishment Table 2022 (Document MB53/08)

28. Anja Van Brabant presented the Budget and Establishment Table 2022. She recalled that the draft budget 2022 had been approved by the MB via written procedure in January 2021 (Annex II & III). The initial total amount requested was EUR 85 Million; following the reinforcement with EUR 10 Million for continuous emergency support in the area of Whole Genome Sequencing and Cross-border Capacity Building Support, the ECDC budget for the financial year 2022 now amounts to EUR 95 Million. This is EUR 30 Million higher than the initial budget for 2021. The Establishment Plan for 2022 foresees 215 Temporary Agents and 130 Contract Agent posts. In addition, the Centre will have around 21 Contract Agents to support international projects funded by EU grants (EU Initiative on Health Security, Africa CDC, IPA VI).

29. The budget 2022 evolution by title compared to the initial 2021 budget will be as follows: 15.1% increase in title 1 (staff expenditure), 14.7% increase in title 2 (infrastructure & administrative costs), and 99.3% increase in title 3 (operational costs). The ratio between administrative expenditure (title 1 & 2) and operational expenditure (title 3) will be 50% versus 50%, compared to 63% versus 37% in 2021 and 65% versus 35% in 2020 and 2019.

30. Johan Carlson noted that the AC had discussed the budget and establishment table but not the SPD 2022 itself. The European Commission confirmed that the ECDC most likely will have the additional EUR 10 Million requested for 2022 approved by the Council and Parliament. ECDC explained that the Centre will have more staff in 2022 than work desks. This is based on the decision not to increase the total office space, but to implement new ways of working in 2022. The AC recommended the MB to approve the budget and establishment table conditional to the approval of the SPD 2022.

The Management Board approved the Budget and Establishment Table 2022.

ECDC Communication Policy 2022-2027 (Document MB53/09)

31. Andrea Ammon, Director, ECDC, presented the ECDC Communication Policy 2022-2027. She mentioned that the Policy built on the work done in the past 15 years and took into considerations external evaluations (third external evaluation, strategic and performance analysis of ECDC response to the COVID-19 pandemic, social media audit, recent European Ombudsman’s report, etc.) and ECDC strategic documents (SPD 2021-2023 and ECDC Strategy 2021-2027). The Policy defines ECDC’s target audiences as being health professionals, policy makers, the general public, media, and ECDC staff, and describes the different communication levels that should be considered when engaging with each of them. It also defines the communication stakeholders with whom ECDC intends to create synergies and/or continue strengthening collaboration to avoid overlaps or duplication of work and ensure that messages are aligned
amongst the different stakeholders: health communicators, NGOs, professional organisations, clinical societies, social media platforms, and communication experts in EU bodies, WHO and CDC’s network. The Policy outlines four priority areas of action: 1) Visibility, reputation and brand awareness; 2) Improved outreach to target audiences; 3) Stakeholder Engagement Framework; 4) Internal communication, employee involvement and advocacy.

32. Following the presentation a few points were raised. The Chair asked whether the Policy was flexible enough to take on board any necessary changes considering, on one hand, that communication was one of the topics that the IAS would look into and, on the other hand, the ongoing mandate discussions which also concerned communication. One MB member commented that the pandemic had shown the importance of communication during public health emergency. With regards to the increased focus on the general public, he stressed the importance of producing easily accessible information for citizens; this point had also been raised in the third external evaluation. He agreed that communication to the staff was very important and added that internal and external communication were closely interlinked. Lastly, he asked if the Policy document could be shared with colleagues in charge of communication in the Ministry of Health. Another MB member commented that the document was well written, and she appreciated that ECDC would work in close collaboration with authorities in the Member States when implementing communication activities targeting the citizens. This was a sensitive point for her country which would be monitored closely. The Deputy Chair and MB member representing the European Parliament pointed out that today it was impossible to avoid communication to the general public as citizens have access to social media in any case. Considering the big challenges related to misinformation, the ECDC Communication Policy complemented and supported the Member States in their communication efforts and helped them tackle misinformation. One MB member noted that it would perhaps be useful to explain to the MB members the reasons behind the planned IAS audit on validation of external communication content.

33. Andrea Ammon thanked the MB members for their comments and ensured that the Policy document, as all documents for the coming years, would be flexible enough for integrating any necessary changes arising from the new mandate. She was pleased that the MB members agreed with the wording concerning the general public and encouraged the Member States to inform ECDC early on in case there were any issues. Once approved, the Communication Policy would be published on the ECDC website; in the meantime, the document could be shared internally. Responding to the comment on the planned IAS audit on communication, she clarified that the audit would look at the internal processes for preparation, review, and validation of external risk and crisis communication and the coordination of this communication with Member States and the Commission during the COVID-19 pandemic. With the rapid information sharing during crisis there was a risk of misalignment if proper processes were not in place and there were a few occasions during the pandemic where information had not been fully aligned.

34. Following the discussion, the MB approved the ECDC Communication Policy 2022-2027.

The Management Board approved the ECDC Communication Policy 2022-2027.


35. Andrea Ammon, Director, ECDC, presented the draft ECDC Single Programming Document 2023-2025. She mentioned that the planning of the activities in 2023 were guided by the ECDC Strategy 2021-2027 and the accompanying implementation roadmap. Changes to the SPD 2023 were expected following the adoption of the amended ECDC Founding Regulation. The SPD 2023 built on the lessons learnt from the COVID-19 pandemic and the continued focus on changing the way ECDC connects with Member States with the aim of better responding to their identified and expressed needs. The budget for 2023 was estimated to EUR 88.8 Million based on the Multi-annual Financial Framework (MFF) 2021-2027. The number of staff would amount to 353 FTEs plus 21 CA's financed from grants. The priority areas for 2023 were similar to those in 2022, but with a specific focus on digitalisation. She mentioned that 71 comments had been received from ECDC's stakeholders; these were listed in the repository of comments together with ECDC replies. As each year, the draft SPD 2023 including annexes will be sent to the MB for approval via written procedure in mid-January 2022. Following MB approval, the document will be sent to the EU institutions by 31 January 2021 as per the usual procedure.
36. Following the presentation, a few points were raised. One MB member stressed the need for strengthened cooperation with WHO Geneva, in particular with regard to artificial intelligence. She suggested that collaboration with the recently inaugurated WHO Hub for Pandemic and Epidemic Intelligence placed in Berlin would be fruitful and also in line with ECDC’s focus on digitalisation. Andrea Ammon replied that ECDC was already in contact with WHO Geneva and within the framework of the ongoing project with Africa CDC, the Centre would also be in contact with the WHO Regional Office for Africa. She added that a meeting with representatives from the WHO Hub was planned to take place on 8 December.

37. The Chair concluded the discussions noting that the document was elegantly written in the sense that it was sufficiently flexible to accommodate necessary changes that may follow with the new mandate. She added that the MB members would have the opportunity to look closer at the document in January when the SPD would be sent to the MB for approval via written procedure.


Memoranda of Understanding between ECDC and the UK Health Security Agency and the ECDC and the Korea Disease Control and Prevention Agency (KDCA) (Documents MB53/11, MB53/12)

38. Antonis Lanaras, Head of Section European and International Cooperation, Director’s Office, ECDC, presented the Memorandum of Understanding (MoU) negotiated between ECDC and the UK Health Security Agency (UKHSA) on the one hand, and between ECDC and the Korea Disease Control and Prevention Agency (KDCA) on the other hand. He first explained the legal basis for this cooperation and recalled that ECDC currently has MoUs with the US CDC, China CDC, the Public Health Agency of Canada, and the Ministry of Health of Mexico, as well as an administrative agreement with the Ministry of Health of Israel/Israel Center for Disease Control. In addition, ECDC has a formal partnership with Africa CDC in the framework of the “ECDCAfrica CDC” project. He recalled that strengthened international cooperation was in line with the ECDC Strategy 2021-2027 (Goal 4).

39. As of 1 January 2021, following UK’s withdrawal from the EU, the UK became a third country in respect to ECDC and was no longer connected to ECDC’s databases (data can however be reported to ECDC via the WHO/Europe as a non-EU country under the joint surveillance activities, including TESSy). Maintaining close collaboration with the UK was obviously of utmost importance, in particular during a public health crisis. ECDC had started negotiations with Public Health England in January 2021, and an agreement had been reached on 10 November 2021. Public Health England was replaced by the UK Health Security Agency (UKHSA) that became operational as of October 2021. UKHSA will act as the single contact point of ECDC in the UK. The MoU has been reviewed by the Legal service of the European Commission and all comments have been incorporated.

40. The MoU covers the following areas of collaboration: Epidemic Intelligence (including sharing information rapidly particularly in the event of a public health emergency); event-based surveillance and related to that outbreak response support; genomic diagnostics and bioinformatics; mathematical modelling; reference microbiology services; microbiology external quality assessment services (EQAs); public health training; communication. The modalities of cooperation include exchange of information, mutual consultation in the event of an emerging health threat, exchange of personnel, and participation in meetings and scientific workshops. Both parties will designate liaison officers to ensure a smooth implementation of the MoU. The contact persons should meet every year to identify joint and/or synergistic activities for the upcoming one to three years, and the organisations should meet at least once every year to carry out an annual review of the collaboration. Each Organisation will bear its own costs in relation to joint activities resulting from the MoU.

41. Concerning South Korea, Antonis Lanaras explained that there had been collaboration between ECDC and the public health authorities in the country since 2015. In December 2019, the Korea Disease Control and Prevention Agency (KDCA) expressed interest in exploring the possibilities of establishing formal bilateral relations with ECDC. During the ongoing COVID-19 pandemic cooperation with international partners, including with KDCA, intensified and several bilateral meetings were organised over the last two
years to share information and knowledge. KDCA also actively participates and shares knowledge in the network of major CDCs established by ECDC in 2019. This cooperation proved to be very useful and led to discussions on a strengthened bilateral collaboration.

42. The MoU covers the following areas: Epidemic Intelligence (including sharing information rapidly particularly in the event of a public health emergency) preparedness and response, surveillance, risk assessment, laboratory capacity-building, AMR – HAI, and public health training. The modalities of collaboration include exchanging information and best practices; mutual consultation in the event of emerging health threat; pursuing joint scientific programs and publishing findings; regular consultations to explore potential areas of cooperation and develop work plans for collaborative activities; and establishing mutually beneficial scientific training opportunities, such as a personnel exchange. With regards to the last point, he mentioned that ECDC had received a request for accepting a Korean colleague for an exchange period in ECDC.

43. Following the presentation a few points were raised. Responding to a question from the Chair on the frequency of the exchange to take place according to the MoU with the UKHSA, Antonis Lanaras clarified that the exchange might take place even at a daily basis where necessary, but a formal meeting should take place at least once per year to review and plan the collaboration. As an example, ECDC is currently discussing a common plan of activities to carry out jointly with the Public Health Agency of Canada. The Deputy Chair and member representing the European Parliament stressed the importance of aligning the work with WHO to avoid any overlapping. Antonis Lanaras agreed that alignment with WHO was indeed very important and was taken into consideration. One MB member congratulated ECDC for the MoUs and added that maintaining close collaboration with the UK was crucial.

The Management Board approved the Memoranda of Understanding between ECDC and the UK Health Security Agency and between ECDC and the Korea Disease Control and Prevention Agency (KDCA).

Annual address of the ECDC Staff Committee to the Management Board

44. Lars Söderblom, Member of the ECDC Staff Committee, thanked the MB for the opportunity to present the work of the Staff Committee (SC). Reporting on the achievements of the SC in 2019-2021, he mentioned that understaffing in the SC had been a recurrent challenge; in this situation the possibility of having ad-hoc elections had saved the SC and would probably remain an important tool also in the future. During this period, the SC had provided input to more than 16 consultations on various topics, such as ECDC organisational restructurings at different levels, teleworking, and hybrid working time. It had also supported a large number of selection panels with SC representatives and had represented staff in committees on ECDC re-organisation, appraisal, reclassification and IAS performance management actions. The work on health and wellbeing had also been pursued both internally and as part of the joint work involving 15 EU agencies. As the current staff situation, he stressed that this was the longest running PHE level 2 so far with a majority of staff working from home during the last 18 months and a huge influx of new staff under these conditions. The SC would also look at the impact of an expanded mandate of ECDC on staff and the impact of “new ways of working” (hybrid working arrangements). Looking forward at the next mandate of the SC and its priorities, he noted that the SC would continue focusing on health and well-being as well as on performance management versus career development.

45. The Chair thanked Lars Söderblom for his presentation and emphasised the importance of the work done by all ECDC staff during the pandemic as Member States were largely relying on the information coming from ECDC. She added that she fully supported the SC in its significant work.

The Management Board took note of the annual address of the ECDC Staff Committee to the Management Board.
Update on ECDC Compliance: Implementation of the ECDC Independence Policy *(Document MB52/10)*

46. Marie-Amélie Ekström, Legal Officer, ECDC, provided a brief presentation on the implementation of the ECDC independence policy. She recalled the main steps of the submission of the Annual Declarations of Interest (ADOI) and Annual Declaration of Commitment (ADoC) by MB/AF members/alternates/observers and added that non-compliance with the requirement to submit DoI resulted in the prohibition to participate in MB/AF activities and meetings, and the access to documents and procedures shared with MB/AF being cut. For 2021, the compliance rate was 98% among MB members and alternates, and 95% among AF members and alternates. She then gave an overview of the mitigation measures in 2021 concerning MB and AF as well as expert meetings and Rapid Risk Assessments. She noted that the COVID-19 pandemic had caused additional challenges due to the difficulty to strictly adhere to the ECDC Independence Policy for non-staff when prioritising tasks for the pandemic.

The Management Board took note of the update on the implementation of the ECDC Independence Policy.

Update from the European Commission

47. John F Ryan, MB Member, DG SANTE, European Commission, reported that the first trilogue meeting had been held on the cross-border health threats Regulation. Concerning the negotiations on the ECDC Regulation, progress had been made on various points and the Commission was hoping that the Regulation could be adopted early 2022 under the French Presidency. He also touched upon the Commission proposal on a framework of measures for ensuring the supply of crisis-relevant medical countermeasures in the event of a public health emergency at Union level (HERA Regulation). Responding to a question from the Deputy Chair on whether any further information could be provided on HERA, he suggested waiting until after the next health Council meeting in December where this matter would be discussed. He also announced that the Commission was going to propose amendments to the Council recommendations agreed in October 2020 regarding internal and external travel during the pandemic, with the aim of simplifying the rules while considering the epidemiological situation and maintaining strong safeguards. Concerning the question on the extension/selection of the ECDC Director, he said that the decision on the proposal had not yet been taken by the Commission but that he would inform the MB as soon further information was available. It was likely that an extraordinary MB meeting would need to be called, possibly before Christmas.

48. Barbara Kerstiens, MB Member, DG RTD, European Commission, updated the MB on ongoing research initiatives in the area of communicable diseases. The presentation touched upon the Pandemic Preparedness Partnership that was being built up and where close contact with the ECDC would be established as well as the One Health AMR Partnership, both funded through Horizon Europe. She also informed the MB members of the results of the emergency request for expressions of interest launched under Horizon Europe to provide funding for research and innovation actions to combat coronavirus variants, with a total funding of EUR 120 Million.

49. The Chair asked whether a written note summarising the updates from DG SANTE and DG RTD could be shared with the MB members after the meeting. The representatives of the European Commission confirmed that such a note would be circulated following the meeting.

The Management Board took note of the update from the European Commission.

Update from the Presidencies of the Council of the EU

a) Update from Slovenia

50. Mojca Gobec, MB Member, Slovenia, gave an update on the Slovenian EU Presidency. She presented the progress made so far on the EU Health Union legislative package and the next steps to be taken. The third trilogue on the ECDC Regulation would be held on 29 November and the Regulation was foreseen to be adopted by the Coreper on 8 December. Concerning the cross-border health threats Regulation, the first political trilogue had taken place on 18 November and the second one would be held
under the French Presidency. Discussions on the HERA Regulation were currently ongoing in the Council Working Party. During the next EPSCO meeting taking place on 7-8 December, the Council was foreseen to adopt Council Conclusions on Strengthening the EU Health Union with focus on four topics: Implementing innovative solutions for resilient health systems; Improving the availability and availability of medicine; Cancer, and EU’s role in global health.

The Management Board took note of the update on the Slovenian Presidency of the EU.

b) Update from France

51. Geneviève Chêne, MB Member, France, updated the Board about the French Presidency starting on 1 January 2022. She mentioned that the Presidency programme would be formally presented in December. In continuation of the Slovenian Presidency, the French Presidency will focus on building the EU Health Union and on the improvement of health systems’ resilience. The Presidency’s aim is to strive for increased coherence and cohesion within the EU in this area. Other topics to be addressed and where stronger cooperation is needed are cancer, rare diseases, global health, and AMR.

52. Geneviève Chêne then presented a proposal for hosting MB55 as a face to face meeting in Paris in June 2022 as an event of the French Presidency. The objective was to increase the visibility of ECDC in France (official level and also the wider public health community), show the added value of ECDC in pandemic time, and increase the awareness of stakeholders about the new ECDC mandate. There would also be opportunities for organising some additional meetings in connection to the MB (to be further discussed at a later stage). She added that Santé publique France had held discussions with ECDC and the Commission’s interpretation services (SCIC) to ensure that all logistic requirements would be met. She clarified that this proposal was presented to the MB for decision as Santé publique France needed a formal approval of the concept in order to proceed with the preparations. Lastly, she clarified that if the COVID-19 situation did not allow for a face-to-face meeting to happen, then MB55 would be held as a regular videoconference meeting arranged by ECDC.

53. The Chair thanked the French MB member for the proposal and asked the MB members whether there were any objections. Several MB members expressed their support for the proposal either orally or through the chat. One MB member commented that this was well in line with ECDC’s focus on increased country knowledge and support and added that this could perhaps be the starting point of coming back to arranging MB meetings in another Member State every two years as experienced in the past. One of the MB members representing the European Commission said that he fully supported the planned meeting in Paris.

The Management Board took note of the update on the French Presidency of the EU. The Management Board approved the proposal to host MB55 in Paris in June 2022 provided that the COVID-19 situation allows for a face-to-face meeting.

Any other business

54. The Chair thanked all the MB Members for their active participation and valuable contributions, and the ECDC staff for their support. She added that the next regular Management Board was scheduled to take place on 22-23 March 2022. Further information on a possible extraordinary MB meeting would be circulated in due course.
Annex: List of Participants

<table>
<thead>
<tr>
<th>Country/Organisation</th>
<th>Representative</th>
<th>Status</th>
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<tbody>
<tr>
<td>Austria</td>
<td>Sigrid Kiermayr</td>
<td>Member</td>
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<tr>
<td>Belgium</td>
<td>Dirk Wildemeersch</td>
<td>Alternate</td>
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<tr>
<td>Bulgaria</td>
<td>Nataliya Spiridonova</td>
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<tr>
<td>Cyprus</td>
<td>Irene Cotter</td>
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<td></td>
<td>Maroussa Konnari Jeronymides</td>
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<tr>
<td>Czech Republic</td>
<td>Jozef Dlhý</td>
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<td>Denmark</td>
<td>Bolette Søborg</td>
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<td>Stine Ulendorf Jacobsen</td>
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<tr>
<td>Finland</td>
<td>Anni Virolainen-Julkunen (Chair)</td>
<td>Member</td>
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<td></td>
<td>Taneli Puumalainen</td>
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<tr>
<td>France</td>
<td>Geneviève Chene</td>
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<td></td>
<td>Anne-Catherine Viso</td>
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<tr>
<td>Germany</td>
<td>Gesa Lücking</td>
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<td>Greece</td>
<td>Theoklís Zaoutis</td>
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<td>Ireland</td>
<td>Colette Bonner</td>
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<td>Italy</td>
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