Draft concept for the satellite workshop as pre-event to the ESCAIDE conference

11–12 November 2015, Stockholm, Sweden

Satellite workshop on 10 November 2015

Courtyard by Marriott Stockholm | Rålambshovsleden 50 | SE-112 19 Stockholm | Sweden

Bridging epidemiology to public health security policy

A satellite workshop presented by Chafea, with contributions from EU experts from the projects in the area of Health Security, funded under the Health Programme 2008–2013.

Background information

The Health Programme funded actions generate relevant data, which is used to orient Public health policies, improve health programmes and services, and increase the health professionals’ capacities to perform risk assessment, support risk management and response to health threats.

The initial concept of this event is to bring experts to discuss on how to bridge epidemiology with public health. The experts will present examples on how the knowledge produced under the Health Programme actions, where used to develop/improve public health programs/policies at EU level in the area of Health Security.

Aims and objectives

The aim of this satellite workshop is to offer experts, project partners and other conference participants the opportunity to exchange information on their work in the field of preparedness and response, and demonstrate how the Health programme actions outputs have been take-up at national/regional level.
During the expert presentation and debate, the panel will identify common challenges and opportunities for improving the EU MS capacities, sustainability of work and future developments.

The meeting will focus on available results, the state of art reports, guides, tools, training programmes developed to support the MS effectiveness of the risk assessment and response to biological threats in Europe. Improved programming and project implementation using the collective expertise from across Europe can be used to contribute to preventing the impact of infectious diseases outbreaks in Europe.

The satellite workshop is supported by Chafea, the Executive Agency for Health from the European Commission, developed in collaboration with the Directorate General for Health and Food safety, and the EU MS experts’ networks on Health Security.

Out of the sixteen actions funded by the Health Programme 2008–2013, a selection of ten EU HP actions were selected based on the public health relevance, European added value of the intervention proposed.
## Draft agenda

**09:30–12:30 h Morning session:**

**Chair:** Cinthia Menel Lemos, Chafea and Anders Tegnell, Public Health Agency of Sweden

### Opening session

- Welcome by the EC, ECDC expert (Piotr Kramarz, Deputy to the Chief Scientist, ECDC) and Public Health Agency of Sweden representative
- Purpose of the meeting, agenda and intention behind the interactive format (Cinthia Menel Lemos - Chafea)
- Bridging health security knowledge from epidemiological studies to public health policy development **SHIPSAN ACT** experience - Christos Hadjichristodolou, SHIPSAN ACT Joint Action coordinator - Thessaly University (EL) (30’)

### Four Project snapshots: preparedness planning and risk assessment session, Chair (Andreas Gilsdorf (RKI) and Anders Tegnell (Public Health Agency of Sweden))

- **10:00 – 10:15** The contribution of the EpiSouth Network to strengthening preparedness for cross border health threats in the Mediterranean (**Episouth plus**), FLAVIA RICCARDO, Istituto Superiore di Sanità, ISS (IT)
- **10:15 – 10:30** Coordinated action in the aviation sector to control public health threats - An EU funded project aiming to facilitate the implementation of the International Health Regulations (2005), (**AIRSAN**) Astrid Milde-Busch, Robert Koch Institute (DE)
- **10:30 – 10:45** Preparing the European public health sector on changing patterns in climate change-related communicable diseases (**Climatrap**), Joris van Loenhout, Centre for Research on the Epidemiology of Disasters (CRED), Université Catholique de Louvain (BE)
- **10:45 – 11:00** Effective communication for responding against biological threats: the results of the Crisis Communication and Risk Management (**CriCoRM**), Grazia Orizio, Azienda sanitaria locale di Brescia (IT)

**11:00 – 11:30 h Coffee break**

**11:30 – 12:30** Expert panel discussion: how can the EU networks expertise can be better used to increase the EU MS capacities on preparedness planning and risk assessment to effectively respond to health threats, from emergent infectious diseases and unknown agents.

Panel facilitated by: Andreas Gilsdorf (RKI) and (ECDC expert - Maarit Kokki) with

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1 SHIPSAN ACT Joint Action - The impact on maritime transport of health threats due to biological, chemical and radiological agents, including communicable diseases
participation of:
1. Massimo Ciotti, ECDC, Head of Section, Country Preparedness Support
2. EU Health programme experts
3. EU MS Policy makers, members of the HSC

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<th>Time</th>
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<tr>
<td>12:30</td>
<td>Lunch break networking</td>
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<td>13:30 – 14:30</td>
<td>Visit Health Programme stand and projects posters:</td>
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<td>Each project has a stand with a poster and facilitator.</td>
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<td>Participants can find out more about the projects they are most interested in. Each facilitator ensures there is a balance of presentation and open discussion at the stands. Three rounds of 20 minutes each (participants can visit up to three projects).</td>
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<th>Time</th>
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<tr>
<td>14:30 – 17:30</td>
<td>h Afternoon session</td>
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<td>Five Project snapshots: Risk management and risk communication (Cinthia Menel lemos (Chafea) and Christos Hadjichristodolou (Thessaly University))</td>
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<td>14:30 – 14:45 Cost–Effectiveness of public health interventions against human influenza pandemics in France (FLURESP), Massimo Fabiani, Italian National Institute of Health (IT).</td>
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<td>14:45 – 15:00 Promotion of Immunizations in Europe: the case of Health Professionals (HPROImmune), Agoritsa BAKA, from Hellenic Center for Disease Control and Prevention (EL)</td>
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<td>15:00 – 15:15 Promotion of Immunizations in Europe: the case of Migrants and the case of Health Professionals (PROMOVAX) Dina Zota, from Prolepsis Institute (EL)</td>
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<td>15:15 – 15:45 h Coffee break</td>
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<td>15:45 – 16:00 Bridging epidemiology to public health security policy: is migration health an issue of concern? (EQUI–HEALTH), Mariya SAMUJOLOVA, Migration Health Division, International Organization for Migration (BE)</td>
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<td>16:00 – 16:15 Quality assured microbiological diagnostics as essential part of epidemiological surveillance and outbreak management (QUANDHIP), Francesco Fusco, National Institute for Infectious Diseases Lazzaro Spallanzani, INMI (IT)</td>
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<td>16:15 – 17:15 Expert panel discussion on how can the EU networks expertise can be better used to increase the EU MS capacities on risk management and risk communication to health threats, from emergent infectious diseases and unknown agents.</td>
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<td>Panel facilitated by: Christos Hadjichristodolou (Thessaly University) and Cinthia Menel Lemos (Chafea) with participation of:</td>
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<td>1. Piotr Kramarz, Deputy to the Chief Scientist, ECDC,</td>
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<td>2. Anders Tegnell, Public Health Agency of Sweden,</td>
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<td>3. EU Health programme experts</td>
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<td>4. EU MS Policy makers, members of the HSC</td>
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17:15 - 17:30 Closing remarks: EC, ECDC (Piotr Kramarz, Deputy to the Chief Scientist) and Public Health Agency of Sweden
List of actions co-funded within the 2nd Health Programme (2008-2013) contributing to the workshop are:

1. CLIMATE TRAP - Climate Change Adaptation by Training, Assessment and Preparedness, [http://www.climatetrap.eu](http://www.climatetrap.eu)

Climate change can affect the spatial distribution of disease vectors and can affect their life cycles, thus leading to higher numbers or to earlier abundance in the year. Seasonal trends of these diseases are evident and certain years with outstanding weather patterns were linked with an enhanced disease incidence. But disease frequency is influenced by many external causes, including preventive measures of the health care system (e.g. vaccination programmes), pesticide application, changes in agricultural practices, changes in forestry and in behavioural patterns, which have much stronger impact than climate change.

Frequent vector borne diseases are included in the general medical curricula. But with a spatial spread of diseases, doctors might get confronted with a disease they have never seen before. This situation calls for some targeted post graduate training modules, which we developed within the Climate-TRAP project.


PROMOVAX brought together institutions from the disciplines of public health, migrant health and immunizations, forming a network of collaboration in the area. In addition to identifying migrant needs, it provided recommendations for the development of effective immunization programs. Materials for migrants are available in 11 common migrant spoken languages, while the HCW toolkit is available in 7 EU spoken languages. Project evaluation showed positive feedback concerning the usefulness of the contents of the toolkit. Evaluation also highlighted the importance of using the material on a larger scale and for a longer period, so as to promote HCW knowledge and skills.


Episouth plus has carried out a preparedness needs assessment and a consensus workshop on IHR implementation identified regional gaps. Training on intersectoriality/interoperability of preparedness for health-threats at national/cross-border level was designed, culminating in the “Nautilus” command-post Simulation Exercise (SE). Four national situation analysis (ENSA-Study) were conducted to describe existing Mediterranean models of coordination of surveillance between national health systems (NHS) and points of entry (PoE).

Episouth plus network has defined four strategic lines for improving surveillance coordination at PoE: invest on a legal framework linking IHR national focal-points with Competent Health Authorities (CHA); ensure the presence of CHA at PoE; elaborate/update relevant protocols processes and procedures; ensure, through training, correct and consistent application of protocols, processes and procedures.

Cost-Effectiveness of public health interventions against human influenza pandemics: Eighteen public health interventions against human influenza pandemics have been selected covering individual disease transmission, societal interventions, Interventions in health care facilities, Immunization, Antiviral distribution, Reducing mortality and Screening. Data sources come from national reports and specific surveys conducted in France, Italy, Poland and Romania. Robust probabilistic sensitivity analyses were carried out taking into account the probability distribution ranges of estimated success rates and costs values. The FLURESP project is the world’s first extensive cost-effectiveness analysis of epidemic responses creating a new approach linking epidemiology and public health policy, which will help governments avoid costly and ineffectual policies.

5. HProImmune - Promotion of Immunization for Health Professionals in Europe, www.hproimmune.eu

Health professionals (HPs) face challenges involving vaccine preventable diseases (VPDs), while recommendations are continuously updated. HproImmune experts defined a short list of vaccines of interest for EU HPs. This was developed through modified Delphi including vaccines for Hepatitis B, Seasonal influenza, MMR, Tdap and Varicella. The project reviewed literature, existing policies, legislation providing a picture of the immunization status of European HPs, information which was entered in an open-access database. Barriers and enablers for EU HPs towards immunizations were explored through carrying out 21 focus groups (282 participants) in 7 countries and an internet survey which received >5,500 responses by HPs from all over the world. Focus groups and survey point towards lack of up-to-date knowledge and information on recommendations, benefits of vaccines and many organizational barriers to receive vaccines. The final toolkit comprises the following in English, Greek, Lithuanian, Romanian, Polish, Italian and German: fact sheets for 5 vaccines: one for physicians and one for other HCWs, a fact sheet on Myths and misconceptions on vaccines, a set of proposed Poster templates, a step-by-step planning guide for hospital managers and PH personnel and promotional material.


One prerequisite for a powerful epidemiological surveillance and outbreak investigation is the correct identification and characterization of the causative infectious pathogen. A special challenge, in this context, is given in cases of highly pathogenic infectious agents. The JA provides a supportive European infrastructure and strategy for quality assured diagnostics of highly pathogenic agents and biorisk management. A number of External Quality Assurance Exercises (EQAE) have been practically performed with the aim to establish best diagnostic practices and considering of mandatory rules for biosafety and biosecurity. In support of the Ebolavirus outbreak activities, partners of QUANDHIP were
directly involved and a screening kit as well as reference material was distributed for Ebola diagnosis.

7. CriCoRM - Project on crisis communication in the area of risk management, www.cricorm.eu

The CRICORM network has produced an up-to-date and integrated review of available evidence and experience of what is already known about best practices in crisis communication; list of key EU stakeholders; evaluation of crisis communication strategies for understanding how to increase public confidence in recommended interventions via effective messages; updated guidelines for health crisis communication; development of Web 2.0 tools for health crisis communication in order to create effective tools for two-way communication with the public; implementation of a training course.

During the project implementation it was found a lack of knowledge in the field. The operators often declared the need to improve their skills in crisis communication, showing that the awareness regarding the essential role of communication strategies in the crisis management process is increasing, although preparedness needs to be implemented.

8. AIRSAN - Coordinated action to control infectious diseases transmission on the aircrafts, http://www.airsan.eu

The number of people travelling by air and the range of destinations is growing. In recent years outbreaks and pandemics caused by rare or emerging pathogens have challenged public health authorities, airlines and airports worldwide. The AIRSAN Project aims to ensure an efficient, multi-sector, multi-stakeholder, coherent response at the EU level to aviation related public health threats that facilitates the implementation and use of the International Health Regulations (IHR; 2005).

AIRSAN has produced new guidance documents, with accompanying training materials. One guidance document provides a standardized approach for risk assessment and management of a suspected infectious disease case on-board an aircraft and harmonized event communication with relevant stakeholders. The second guidance document describes the rationale for public health authorities to initiate contact tracing, potential sources and scope of passenger data stored by airlines, and means of submitting requests for passenger details to the airline.

The AIRSAN Project’s achievements include establishing a close collaboration between the public health and the aviation sector as well as in harmonising existing procedures.

9. SHIPSAN ACT (Joint Action) - The impact on maritime transport of health threats due to biological, chemical & radiological agents, including communicable diseases, http://www.shipsan.eu

SHIPSAN ACT partners have carried out a needs assessment through literature reviews, surveys and site visits. A Literature review identified 196 ship-associated infectious diseases outbreaks with >24,000 cases and 19 deaths (1990-2013), chemical and radiological events are also described and provide an indication of the potential hazards that exist. The Information System used by MS to follow-up 22 events (gastroenteritis, varicella, legionellosis, measles, dengue, meningitis, tuberculosis) on 19 ships providing information on 1689 cases and record of 6364 IHR Ship Sanitation Certificates. Training has been provided using e-learning (>400 trainees), webinars (>150 attendants), on-the-job training (110 officers via 140 pilot inspections at 33 ports, against the European Manual for Health and Hygiene Standards developed by SHIPSAN)
and training courses (>200 officers and seafarers). In addition, Q&A for Ebola viral disease, guidelines for the risk assessment of chemical/radiological events and a web-based occupational health tool have also been developed.

10. EQUI-HEALTH - Fostering health provision for migrants, the Roma, and other vulnerable groups (IOM Direct Grant Agreement) http://equi-health.eea.iom.int/

Six assessment missions (Croatia, Greece, Italy, Malta, Spain, Bulgaria) and situational reports on public, occupational and migrant health were produced. This assessment cover all the stages of the reception process of irregular migrants in the Mediterranean region, based on more than 400 interviews with health professionals, law enforcement officers, migrants, CSOs; more than 15 stakeholder meetings with local and central authorities, MoH, MoI, etc.; findings validated at national consultative committees with national stakeholders.
No outbreaks and/or major epidemiological concerns were discovered concerning the special health issues under EU surveillance. Prolonged reception process and bad living conditions including, severe overcrowding in certain localities, increase the risk of communicable diseases. Limited presence of health staff, lack of systematic health assessment and issues of continuity of treatment of newly arrived migrants, as well as nonexistence of standardized migrant health data collection at national and EU levels limit the knowledge and possibilities for adequate intervention in case of epidemiological concern for the public health.