



**COUNCIL OF
THE EUROPEAN UNION**

Brussels, 30 November 2007

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SAN 240

NOTE

from: General Secretariat of the Council
to: Council

Subject: **Health Security related matters**
– Information from the Commission

Delegations will find in the annex a note from the Commission on the above-mentioned subject, which will be dealt with under "any other business" at the Council meeting (Employment, Social Policy, Health and Consumer affairs) on 5 and 6 December 2007.

WRITTEN INFORMATION FROM THE COMMISSION

The Commission would like to draw the attention of Council to three related issues:

- the Health Security Committee;
- the Global Health Initiative; and
- the technical report of the European Centre for Disease Prevention and Control on the assessment of influenza pandemic preparedness in the Member States.

HEALTH SECURITY COMMITTEE

The EPSCO Council of 22 February 2007 agreed to the transitional prolongation and extension of the mandate of the Health Security Committee, in view of a future general revision of the structures dealing with health threats at EU level. This revision would provide the opportunity to address the establishment of a long term legal basis for the Health Security Committee.

The last HSC meeting took place on 21 November 2007 in Luxembourg at the Château de Senningen, which is a secure meeting place of the government of Luxembourg.

The HSC adopted documents on the rules of procedure, the working structure of the Health Security Committee, and the terms of reference of the sections of the HSC, defining [basic principles](#) of the future work of the HSC.

The HSC plenary will meet twice a year. The plenary is supported by sections on Chemical, Biological, and Radio-Nuclear threats (CBRN), influenza pandemics preparedness, and generic preparedness for health emergencies, which are preparing documents to be adopted in the HSC plenary. If needed, additional ad hoc working groups can be created.

The work plan and the priority list were debated at the last HSC meeting, but no final agreement could be reached. The HSC created an ad hoc drafting group, which will decide on themes and priorities for the next three years. The drafting group will meet on 10 December 2007 to ensure that the work plan and the priorities are settled by the end of the year. However, the Commission considers the top priorities to be:

- Resolving problems on passenger tracing in domestic and international air traffic.
- Completing pandemic influenza preparedness based on gap analysis in the ECDC influenza report, and identifying national policy needs.
- Border control issues, particularly free movement and IHR implementation.
- Threat assessment for chemical and radio nuclear risks and improving preparedness in these areas.

The Commission is preparing the yearly activity report of the HSC and will submit the report to Council, as foreseen in the renewed mandate, when the Committee has given its comments and approval.

From the Commission perspective, the Committee now has solid foundations since the rules of procedure, working structure, and terms of reference have been agreed.

The Commission would like to stress that the Health Security Committee under its renewed mandate is an effective forum for linking decision makers in Member States on health security issues. To guarantee an effective response and a high level of operational preparedness, Member States need to ensure the nomination of high-level representatives authorised to take decisions at national level with an appropriate degree of security clearance, as laid down in the Rules of Procedure.

GLOBAL HEALTH INITIATIVE

The Global Health Security Initiative (GHSI) originated in October 2001, under the leadership of former U.S. Department of Health and Human Services (HHS) Secretary Tommy G. Thompson. In the aftermath of the events of September 11, 2001, and the subsequent anthrax attacks, Secretary Thompson called for the establishment of a regular opportunity for Health Ministers to meet, exchange ideas, share information and coordinate their efforts to improve global health security.

Canada hosted the first GHSI Ministerial Meeting in Ottawa in November 2001 to discuss global health security. Attending, in addition to Canada, were Ministers/Secretaries/Commissioner of Health and senior health officials from the European Commission, France, Germany, Italy, Japan, Mexico, the United Kingdom, the United States, and the World Health Organization. Since its inaugural meeting in Ottawa, the GHSI Ministerial Forum has met in London (2002), Mexico City (2002), Berlin (2003), Paris (2004), Rome (2005), Tokyo (2006), and Washington D.C (2007). The GHSI has not altered its membership – G7 countries, Mexico, the European Commission, and the WHO as a technical advisor – since its creation in 2001.

Major achievements of the GHSI are:

- a. Strengthening Smallpox Preparedness and Response
- b. Improving International Communications and Risk Management
- c. Testing and Enhancing Laboratory Capabilities
- d. Advancing Global Pandemic Influenza Preparedness and Response
- e. Preparing Against Chemical and Radiological Threats
- f. Sharing Information

At the last ministerial meeting in Washington DC a strategy paper was adopted setting out priority issues for the future. It has been agreed to base future work on a thorough risk and threat assessment. There was strong support from Ministers to continue the GHSI as a useful forum for discussing health threats in an international environment. Although only four Member States are members of the GHSI, the Commission will ensure that results of GHSI work will be made available through the Health Security Committee to all Member States.

In addition, the Commission would like to inform Council that the Commission is hosting the next GHSI ministerial meeting during the second half of 2008.

**TECHNICAL REPORT OF THE EUROPEAN CENTRE FOR DISEASE PREVENTION AND CONTROL
ON THE ASSESSMENT OF INFLUENZA PANDEMIC PREPAREDNESS IN THE MEMBER STATES**

The Commission recalls the final report of the European Centre for Disease Prevention and Control (ECDC), which follows the first assessment report issued by the ECDC on 22 February this year.

The final report comprehensively sums up the current state of preparedness in the EU after completion of assessment visits to all 27 EU Member States, and describes in detail the progress being made but also the gaps that still exist.

The Commission invites health ministers to study the report assessing the national systems and the state of preparedness. The Council could use the recommendations outlined in the report as a basis for conclusions to be adopted following a more in-depth discussion at the upcoming formal meeting next year. These conclusions could then serve to effectively close the gaps that are still evident.

The Commission considers that the EU must sustain the momentum of the ongoing work so that by the end of the decade Europe is adequately prepared to meet all the challenges.

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