

ECDC Management Board

**MB12 Minutes
17 June 2008**



**Minutes of the Twelfth Meeting of
ECDC Management Board
Stockholm, 18–19 March 2008**

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Summary of decisions

The Management Board:

- adopted the minutes of the 11th meeting of the Management Board (Stockholm, 13–14 December 2007);
- approved the Director's Annual Report on the Centre's activities in 2007 after stipulating some editorial changes;
- adopted the revised version of ECDC's *Indicators for the ECDC Strategic Multiannual Programme 2007-2013 (Annex II: Indicators)*, after stipulating some minor changes;
- approved the proposed update of the reimbursement rules for attending ECDC meetings, with a mandate to the Director to adjust these rules when necessary, provided that the MB is informed immediately; and approved that European Parliament representatives would be eligible for reimbursement according to ECDC rules;
- approved the upgrading of nine Temporary Agent posts in the establishment table 2008 after the Administration Unit had extensively updated the document regarding budget consequences and stringent argumentation for the need to upgrade nine positions;
- approved the part referred to 2008 in the Strategic Audit Plan for ECDC 2008-2010.

The Management Board also:

- noted the progress made in the activities of the Centre;
- asked ECDC to distribute a staff list to the members of the MB;
- requested that an interim report on the practical use of the indicators for ECDC's Strategic Multiannual Programme be presented in a year's time;
- noted ECDC's Multiannual Staff Policy Plan 2009-2011 but postponed approval until the next MB meeting in June, when the final comments and feed-back from DG Sanco should be incorporated in the document;
- noted the reports from the MB/AF Working Group that discussed a number of issues related to ECDC's activities and on the discussion regarding ECDC external group of experts and role of the Centre on vaccination policy, requested that ECDC prepares a document listing the points raised for attention and pilots during one year a vaccination consultation group;
- discussed a paper which provided an update on ECDC's external relations strategy and requested that ECDC makes available a list of its contacts;

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- noted progress made in the Seat Agreement for ECDC
- noted progress on various financial and audit issues;
- noted progress on the evaluation and assessment of the surveillance networks;
- noted the revised ECDC Public Health Event Operation Plan;
- noted the proposals for signing Memoranda of Understanding with EFSA, the Joint Research Centre and the Swedish Rescue Agency.

Opening and welcome by the Chair

1. The Chair opened the 12th meeting of the Management Board (MB) and welcomed all representatives. A particular welcome was extended to the newly appointed member Dr Françoise Weber, from France, and Dr Arlinda Frota, alternate from Portugal. Apologies were received from Luxembourg, Lithuania and DG Research. A proxy statement was given by Luxembourg to Belgium who accepted it.
2. During item 8 on the agenda, the vice-Chair Dr Minerva-Melpomeni Malliori needed to leave the meeting, giving proxy to Jacques Scheres, representative for the European Parliament. After day one, Dr Hubert Hrabčík, member for Austria, needed to leave the meeting and gave proxy to Dr Franz Bindert, member for Germany. For the second day, the Swedish member Dr Irène Nilsson-Carlsson was replaced by the alternate Dr Johan Carlson.

Item 1: Adoption of the Agenda (*documents MB12/2 Rev.2, MB12/3*)

3. The agenda was adopted without any changes or amendments.
4. The Chair asked the participants to declare any interests they may have with regards to the agenda items and to use the form distributed in advance by the Secretariat. The Chair declared that his institute hosts a disease-specific network. The member for Denmark, Else Smith, also declared that her country hosts a disease specific network.

Item 2: Adoption of the draft minutes of the 11th meeting of the Management Board in Stockholm, 13–14 December 2007 (*document MB12/4*)

5. The minutes of the 11th meeting were approved as presented in document MB12/4.

Item 11: Director's briefing on ECDC's main activities since the last Management Board meeting

6. The Director reported on ECDC's most recent activities. She noted a successful third meeting of the WHO/ECDC Joint Coordination Group (JCG) on 27–28 February 2008 that helped to identify further strategic issues. During the meeting, both ECDC and WHO emphasised their commitment to collaboration at all levels. Also, it was decided to hold regular teleconferences every three months. In a letter to the Director following the meeting, Dr Marc Danzon, WHO Regional Director for Europe, praised the JCG meeting as 'another milestone' toward common goals.
7. The Director then highlighted the inauguration ceremony of ECDC's Emergency Operation Centre (EOC), which took place on March 4 with the presence of Dr Miroslav Ouzký (Chairman of the European Parliaments' Committee on Environment, Public Health and Food Safety [ENVI]) and the MB Chair Dr Marc Sprenger. The inauguration event received strong media interest.
8. The Director also described a visit by EFSA's Executive Director, Mrs Catherine Geslain-Lanéelle on 29 February as very productive. Collaboration options were reviewed and a Memorandum of Understanding will be signed in the near future.

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9. Information was presented regarding the most recent visit by the Court of Auditors, which recognized significant improvements in ECDC's accounting practices. A report with the results of this Audit will be presented at the next MB meeting in June.
10. The Swedish parliament's visit — visitors were members of the health and foreign affairs committees — helped to forge stronger ties to the host country.
11. The joint Management Board and Advisory Forum's Working Group met on February 26 and reviewed issues such as indicators for the ECDC Strategic Multiannual Programme 2007–2013, scientific advice vs. recommendations, and ECDC's role in vaccination policy. As the Director pointed out, the Working Group was instrumental in taking a variety of issues forward.
12. A mission to Slovenia was successfully concluded. The Slovenian EU Presidency is particularly interested in issues related to antimicrobial resistance and healthcare-associated infections — a fact that opportunely links ECDC's activities in this area to the Slovenian Presidency's interests.
13. During the last meeting of the Advisory Forum, major steps were taken to identify priorities for scientific advice. Other items discussed included the implementation of Case Definitions (reporting is scheduled to start on January 1, 2009), the revision of a list of diseases for enhanced EU surveillance, an update on recent health threats (e.g. Influenza A(H1N1) virus resistance to oseltamivir), and a coordinated approach to risk assessment.
14. ECDC recently developed a new organisational chart ('organigramm'). While the matrix structure of the former chart has been preserved, new unit sections have been added, reflecting ECDC's continued growth. In addition, ECDC is currently in the process of selecting new section heads and coordinators for its disease-specific programmes. The internal selection process is almost completed; results will be announced in two or three weeks and the MB will be kept informed on this.
15. In response to questions and requests from the floor, the Director agreed to release an ECDC staff list so the MB can assess who to address in each Unit. As to the selection process for section heads, she explained that the internal selection process adhered to the same strict principles and standards that are applied to all of ECDC's recruitment activities.
16. It was also requested to inform the MB in advance on how ECDC is supporting the work of the EU Presidency and the priorities on this issue. As regards the work with the Slovenian EU Presidency, the Slovenian representative highlighted that ECDC already met with Slovenia's Chief Medical Officer on occasion of the ECDC AMR Focal Point Meeting, and consultations were very productive.

Item 3: Director's annual report on the Centre's activities in 2007 (document MB12/5)

17. As stipulated by ECDC's founding regulation (Regulation (EC) No 851/2004 of the European Parliament and of the Council), an annual report on the Centre's activities has to be presented to the MB for approval. The final publication will then be forwarded to the European Parliament in June. The Director pointed out that a first draft of the 2007 Annual Report had already been forwarded to all MB members in December 2007. The finalised version was made available before this meeting and reflects accountability on the implementation of the 2007 Work Programme.

18. During the course of the discussion, suggestions for some editorial changes were made: a) generic information (e.g. ‘four national institutes’) should be avoided and countries should be named; b) the pie chart on p. 50 (geographical balance of ECDC staff) should be omitted; and c) instead of ‘guidelines’ (several occurrences) the word ‘guidance’ should be used.

19. In reply to several remarks made by one representative, the Director explained that the Advisory Forum’s (AF) focus had been shifting recently to fully reflect its mandate in the Founding Regulation. The AF now dedicates its meetings to the quality and excellence of ECDC’s work, support priority setting and to identify the main emerging health threats. As to the somewhat vague language in some of ECDC’s memoranda of understanding (MoU), the Director clarified that MoUs with European partners could be very explicit, while MoUs outside of Europe (e.g. China or Canada) — and thus not entirely within the mandate of ECDC — are worded more cautiously. On the question of ECDC’s role toward communicating to the general public and supporting Member States in their communication, the Director referred to the founding regulation that gives ECDC the mandate to address the public directly and the clear procedures already existing for communication, although this issue could be revised in the next MB meeting.

20. When put to a vote, the annual report was approved with a show of hands by majority. All editorial suggestions will be implemented.

Item 4: Indicators for the ECDC Strategic Multiannual Programme 2007-2013 (revised Annex II on indicators)

(document MB12/6)

21. Andrew Amato, Deputy Head of the Surveillance Unit, and Arun Nanda, WHO Liaison, introduced the topic and then proceeded to present the redrafted indicators. The number of indicators has been reduced to 31. While Target 2 through Target 7 indicators were presented for final consideration and approval, Target 1 indicators (disease specific) were only presented for temporary approval with the proposal that these will be formally adopted following the mid-term review of the Multi-Annual Programme in 2010.

For the remaining Targets, it was suggested that these undergo a one-year pilot phase, and then are modified if necessary before formal adoption next year. The recently established Monitoring and Evaluation Office at ECDC will oversee this process and produce a report in one year’s time as feedback to the MB.

22. Ms Malliori, vice-Chair and Chair of the joint MB/AF Working Group, reported briefly on the group’s meeting on 26 February and how its recommendations were incorporated in the current wording of the indicators.

23. Comments made from the floor led to amendments in the original document (MB12/6). The MB requested the following changes:

- a) item 1.4 (p. 7): ‘global horizon scanning’ on international health threats should be added;
- b) item 1.6.B. (p. 7) should be adjusted, so as to clarify that this refers to the eventual Health Council recommendations;
- c) item 2.2. (p. 8): ‘where appropriate’ should be added after ‘subsequent integration of all the Dedicated Surveillance Networks’;

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- d) the introductory paragraph for Target 3 (p. 9) should read ‘a major resource’ not ‘the major resource’; and
- e) Target 5 (p. 10) should be amended by an additional indicator related to the quality of training activities;

24. Regarding point 23.d) above, the Director explained that the document was already approved by the MB. Therefore, in principle the approved text should not be changed at this stage but following the external evaluation report then changes to the text of the plan could be discussed. The specific text of Target 3 should be ‘a major resource’ and the appropriate change in the Annex would be made to match the MB approved text.

25. By a show of hands, the document on indicators (including the proposal to pilot indicators for Targets 2 to 7 for one year and the Target 1 indicators in more detail in 2010) was approved by majority, provided that all recommended changes would be carried out and an interim report on the practical use of all indicators would be available in a years’ time.

Item 5: Reimbursement rules for attending ECDC meetings

(document MB12/7)

26. Jef Maes, Head of the Administrative Services Unit, presented a proposal to update the reimbursement rules for ECDC meetings held in Sweden. It includes an update of the maximum ceiling for hotel rates, to be raised from €145 to €180. Also, ECDC asked the MB to delegate to the director the decision for future rate increases for those times when the MB is not available. ECDC also proposed to adopt reimbursement rules for attending meetings outside Sweden as listed in the Commission’s Guide to Missions (country rates).

27. During the discussion, the question was raised how to reimburse representatives of the European Parliament (EP) for their participation in ECDC meetings. Jef Maes replied that EP representatives would be eligible for reimbursement according to ECDC rules if the MB so decides. Any such decision had to be put either in the minutes to certify the MB’s agreement, or in the rules, but the latter option would be more complex.

28. Some discussion followed regarding EP representatives reimbursement rates at other EU agencies and the maximum time allowed for filing reimbursement claims (30 days or three months). The European Commission representative pointed out that ECDC should make sure that ECDC’s rules accept no legal liability for accidents on the way to or from an ECDC meeting.

29. It was also recommended that when dealing with changes in documents used in previous MB meetings, the proposed amendments should be presented as track changes in the document to be circulated to the MB, in order to highlight which changes are requested.

30. After the discussion, through a show of hands the MB approved by majority the proposed reimbursement rules and gave the ECDC Director a mandate to adjust these rules when necessary, provided that the MB is informed immediately. A section on exclusion of liability will be added to the reimbursement rules. Also, EP representatives will receive the same compensation as the experts attending the ECDC meetings. The maximum time to file a claim will remain unchanged at three months.

Item 6: ECDC's Multiannual Staff Policy Plan 2009-2011 (*document MB12/8*)

31. Jef Maes, Head of the Administrative Services Unit, presented ECDC's multiannual staff policy plan, outlining the period from 2009–2011. The MB decided to postpone approval of this plan because final comments/feedback from DG SANCO need to be incorporated. Members of the Board also requested clarifications on issues like allocation of the staff, gender balance issues and priorities for the future.

32. The Multiannual Staff Policy Plan will be resubmitted at the next MB meeting in June.

Item 7: Upgrading of nine Temporary Agent posts in the establishment table 2008

(*document MB12/9*)

33. ECDC presented a list of nine Temporary Agent posts to be upgraded and requested the MB's approval. During the discussion MB members requested additional information in order to be able to make an informed decision. Specifically, the MB asked for the proposed upgrade's budget consequences, tasks to be performed by this staff, effects on the individual units, level of expertise. The MB agreed that a more stringent argumentation in regard to ECDC's need to upgrade the nine positions would help reach a decision.

34. The Director and the Head of the Administration Unit promised to provide all missing information for day two of the meeting.

Feedback from the Steering Committee for ECDC's external evaluation

35. The Chair asked Dr Hubert Hrabcik (Austria), Head of the Steering Committee for ECDC external evaluation, to give a short summary of the second draft interim report presented during a meeting on 17 March 2008 by Ecorys, the consultancy commissioned with the external evaluation. According to information provided by Ecorys, the evaluation progresses as scheduled. Despite Ecory's assurance of meeting all deadlines, the Steering Committee expressed concern over the fact that so far only a few officials at national health ministries had been interviewed. Therefore, the Steering Committee proposed to address countries where interviews are still missing in order to facilitate completion of the process. As to the methodology of the evaluation, the Steering Committee insisted that all responses should be evaluated by subgroup (ECDC staff, general public, etc.). A final draft of the Ecorys report is expected for June 10, six days prior to the next meeting of the Steering Committee. The final report is due in mid-August. The Steering Committee plans to meet in September when the final report will be reviewed and recommendations for the MB's Paris meeting in November will be prepared.

Item 8: Report of the MB/AF Working Group

(*document MB12/16*)

36. The Chairman asked the vice-Chair to report on the discussions during the Joint MB/AF Working Group, held 26 February 2008. Six items were on the agenda, of which

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one (Indicators for the ECDC Strategic Multiannual Programme 2007–2013) was on the MB agenda as a separate item and so the discussion would not be reopened on that issue.

8.1: Scientific advice versus recommendations

(document MBWG/4)

37. The vice-Chair referred members to the minutes of the joint working group as they contained all the salient points raised during the meeting. Paragraph 17 of the document MB12/16 summarized the main remarks. It was stressed that use of the word ‘recommendations’ should be avoided; likewise ‘guidance’ was a preferred term to ‘guidelines’, as ECDC’s documents shall always clarify that they are dealing with scientific advice and risk assessment and that mandatory rules or guidelines are in the competence of the Member States.

38. The Chair reminded members that this issue was for discussion, rather than approval. After taking comments from the floor, he accepted the approach taken in the document presented and suggested it be reviewed after one year.

8.2: ECDC external groups of experts *(documents MBWG/5, MB12/16 Add.1)* &

8.4: ECDC’s role in vaccination policy *(document MBWG/7)*

39. The vice-Chair explained that this issue had given rise to a lengthy discussion in the working group and, referring to paragraph 42 of document MB12/16, that the WG had not felt able to agree fully to the proposal for establishing longer-term scientific/technical expert groups/committees (hereafter referred to as ‘consultation groups’) without a further discussion at this meeting of the Management Board. ECDC had prepared a specific example of how they envisaged such a group would operate.

40. Johan Giesecke, Head of the Scientific Advice Unit, clarified ECDC’s need to be able to consult external scientific experts as issues arise. He reminded members that the scientific panels are dissolved as soon as they deliver their report on a specific question, leaving no opportunity to consult with them in the event that further clarification is required. Further, urgent ad hoc advice can be needed and the existence of longer-standing groups of experts would facilitate this. He explained that ECDC would naturally ask the competent bodies to suggest names of relevant experts. However, to take all those recommended would create far too large a group, and further, ECDC would retain the right to choose experts from outside the public health bodies, such as academics.

41. Johan Giesecke also presented the proposal for the establishment of a consultation group on vaccination as a concrete example, stressing that the purpose is primarily to give ECDC advice internally and that the group would have no policy-setting function.

42. Members acknowledged that ECDC needed to consult with experts to ensure it receives and provides the best scientific advice and welcomed the concrete example given. However, they expressed some concerns over the proposed format.

43. One member felt that it was important to clarify the status of the experts providing ‘independent’ advice. Although the experts would be giving their scientific opinions as individuals (i.e. not as representatives of their countries or institutions) it should be stressed that ECDC takes responsibility for any advice/opinions/guidance issued on the strength of these independent opinions. This was confirmed by ECDC.

44. Further to this point, questions were asked as to whether the discussions of these groups would be closed as is the case in some countries, and concerns raised about the transparency of the process (both of selection of experts and their discussions). Johan Giesecke explained that formulating such groups was itself an attempt at transparency by setting out the process for seeking advice which until now has been a more informal matter between individual scientists. It was suggested that it should be possible to trace how any particular scientific opinion was arrived at. Johan Giesecke agreed on this point.

45. Some comments were made specifically regarding the proposed Vaccination Consultation Group. It was felt that this was a good topic to choose as an illustration as it is such a difficult and sensitive subject. In terms of the make up of the group it is important to distinguish between vaccine experts and public health experts as the public health issues are much wider than those that concern vaccine specialists. There needs to be clarity about which issues the group would consider.

46. A strong concern of several members was the possible duplication of work between the various actors (e.g. other ECDC groups/panels, other EU Agencies, within the Member States) and one member warned against the possibility of having to reconcile divergent opinions from these various bodies. It was suggested that an important role for such a group should be to identify and collect work that currently exists in the Member States on a given issue, to highlight any gaps that become apparent and to find a mechanism for disseminating this information back to the Member States. This can only be done at EU level. Johan Giesecke agreed that this should be one of the tasks for a consultation group, but reminded members that this is also the role of the Advisory Forum.

47. Concerning the list of experts, questions were asked about whether it would and/or should be published, who would have access to the list, and how ECDC could ensure that it chose the most pertinent experts. In response, Johan Giesecke explained that the current list would be reviewed and that more stringent criteria would be applied.

48. In conclusion, the Chair proposed that a document be prepared listing the points raised for attention, and to go ahead with the vaccination consultation group as a pilot. After a year of operation, it could then be reconsidered alongside the points for attention, and a decision made as to whether the procedure needed to be adjusted or discontinued. No other consultation group will be set up prior to the evaluation of this first pilot. This was agreed to by a majority show of hands.

49. There was a further call by a representative to see a comprehensive list written up of all the instruments for scientific advice at ECDC's disposal to be presented at the next MB meeting.

8.3: ECDC's role in supporting Member States upon request in the implementation of Annex I of IHR

(document MBWG/6)

50. Denis Coulombier, Head of the Preparedness and Response Unit, summarised the changes that had been made to the paper in the light of previous comments.

51. Welcoming the paper, one member added that the challenge now is to make it a reality. He suggested that the European Commission should consider ways to assess

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progress after a period of time, and to ensure implementation across Member States proceeds at a similar pace.

52. One member referred to paragraph 89 of the minutes of MB11 ('The European Commission representative ... mentioned the main areas where the European Commission work has been focusing: the impacts on trade in the area of points of entry, as well as impacts on other policies...') and asked the European Commission for a statement.

53. In response, the representative from the Commission stated that it is a complex legal question and was raised in an audit of crisis management within the Commission. There could be implications in the field of trade if the IHR are applied in such a way as to limit free movement of goods and/or people. There is a study under way to identify areas of EU competencies that could be affected by the IHR and any that arise will need to be looked at individually.

54. He added that there are systems other than EWRS that are potentially affected; some of these are within the competence of other Directorates-General of the Commission. Negotiations are ongoing as to how to build bridges between them in the context of IHR.

55. Denis Coulombier reassured members that the notification for IHR through EWRS was for now just a prototype to assess how practical it would be. But in any case there would never be an obligation to use it and countries would still be able to report directly to WHO.

56. Summing up, the Chair noted that this document has been useful in clarifying the expectations of Member States with respect to IHR.

8.5: ECDC's working relations with Competent Bodies

(document MBWG/8)

57. Alain Lefebvre, Country Relations and Coordination, outlined the current status of the work of the AF Working Group on relations between ECDC and Competent Bodies. It is anticipated that their report will be delivered to the Advisory Forum in May. The Management Board will be informed of the results of this discussion.

Item 9: Update on ECDC's external relations strategy

(document MB12/10)

58. John O'Toole, External Relations, introduced the paper giving an update on the external relations strategy, as had been requested by the MB in December 2006.

59. A remark questioning the need to sign MoUs with different agencies was raised by one representative.

60. Although the document goes in the right direction, the European Commission highlighted the importance of having a more strategic position, with more detail on prioritisation and a plan of how to operationalise the strategy. The Commission representative also urged caution in deciding which countries to engage with over others.

61. He informed members that the Commission has written to ECDC with comments from the legal services regarding the representation of ECDC at international level (for example, with respect to WHO and WHA).

62. John O'Toole confirmed that as a scientific/technical agency, ECDC follows the Commission policy line and works especially closely with them when there are financial and/or legal implications. The paper sets out a set of priorities.

63. In response to a question regarding relations with Russia, John O'Toole explained that although some discussions had taken place with the appropriate Russian health authorities, the contacts are part of the overall external relations of the EU with Russia. The representative from the Commission added that negotiations are currently underway between the EU and Russia and a chapter on health has been included.

64. One member asked whether ECDC could make a list of its contacts available to the AF and Competent Bodies as it would prove a useful resource. ECDC agreed to do so.

65. The representative from the Commission added, for the information of members, that current negotiations with Switzerland also cover the work of ECDC.

66. The Chair proposed that the paper be updated before the year 2010 and discussed again in 2010.

Item 10: Update on the Seat Agreement for ECDC – timetable

67. The member for Sweden updated the Board on the progress made and the timetable for dealing with the outstanding issues. A report on the social security number aspects will be presented on 1st of June by the committee working on this issue.

68. One member asked that the views of ECDC staff be heard in order to monitor whether any real improvement is being made.

69. The Director thanked the Swedish member for her efforts. She explained that it had already been agreed that ECDC staff experiences will feed into the discussions of the Swedish Government's working group. The ECDC staff committee is closely following these issues and additionally staff is encouraged to report their experiences (positive and negative) to HR colleagues.

Item 12: Update on ECDC budget 2008

70. Jef Maes, Head of the Administrative Services Unit, outlined the processes in house for budget monitoring and plans to develop this in 2008.

71. Regarding the figures on the budget execution for 2007, one member asked for comment on the difference between the 98% of funds committed and 58% of payments made, and whether this is acceptable. Jef Maes stated that this had been discussed with the audit committee and the target for 2008 had been set at 63%. In three years' time, when the Centre moved from the build-up to a more stable phase, the aim would be to reach 70% and this would be a good result for a stable organisation.

72. The Commission asked for clarification on the control measures employed regarding money spent on ECDC's behalf by contract/grant holders. It was explained that on-site controls are foreseen in the work plan of the internal auditor and two grant holders will be audited this year.

Item 13: Audit issues

IAS Strategic Audit Plan for ECDC 2008-2010

(document MB12/18)

73. Stefan Sundbom, Internal Auditor, presented the Strategic Audit Plan of the Commission's Internal Audit Service and referred members to the minutes of the meeting of the Audit Committee.

74. The part of the document relating to the plan for 2008 was adopted by the Board by a majority show of hands.

Feedback from the 8th meeting of the Audit Committee held 17 March 2008

75. Jef Maes, Head of the Administrative Services Unit, provided feedback from the meeting of the Audit Committee and reported back on the visit of the Court of Auditors. The report of the Court of Auditors will be ready for the June MB meeting.

Provisional annual accounts 2007

(document MB/12/17)

76. The provisional accounts for 2007 were presented for information. The final accounts for 2007 will be ready for the June MB meeting.

77. The Chair asked for information on the proportion of ECDC staff who are working on ECDC's primary function of infectious disease control, as opposed to those working in administrative and control functions. He further asked what proportion of the technical staff's time was spent on administrative activities. Acknowledging that checks and balances are important, he stated the view that it is also important to minimise the administrative burden on technical staff in order to allow them to focus on their core work.

78. The Director responded with an estimate that 60% of staff is engaged in scientific and technical activities and that the Annex to the paper gives a breakdown of staffing. She also stated that the bulk of management issues were dealt with by the management team.

79. The representative of the European Commission added that it will be interesting to look at the multi-annual staff plan to see the difference in proportion of administrative versus technical staff as ECDC moves out of the start-up phase.

Item 14: Update on the evaluation and assessment of the surveillance networks

(document MB12/11)

80. Andrea Ammon, Head of the Surveillance Unit, updated the Board on current progress.

81. The Chair asked the floor for comment. One member highlighted the importance of ensuring that staff in the Member States remained engaged and that a sense of ownership needed to be fostered.

82. A question was raised regarding the overlap of networks that deal with various issues related to MRSA. Andrea Ammon explained that it is already in the work plan for 2008 to consider how best to resolve this in consultation with the relevant experts in the

Member States. In addition, more staff specialising in these issues will be recruited to the Surveillance Unit during 2008.

83. The economic issues were raised by one member. Although no cost analysis had been done, it was felt that centralised administration and IT functions would prove to be more efficient financially.

Item 15: Update on ECDC Public Health Event Operation Plan

(document MB12/12)

84. Denis Coulombier, Head of the Preparedness and Response Unit presented the revised plan, highlighting the principal changes that had been made following simulation exercises. He updated members on the further exercises that are planned for 2008, for June and October.

85. In reply to a comment from the floor, it was explained that the SOP for response currently being developed will make commitments such as a timeframe for an interim risk assessment following an EWRS alert. The PHEOP, together with the EOC, form the support for those procedures.

86. The European Commission brought their planned exercises for 2008 to the notice of the Board – a tabletop exercise in April and a full scale exercise in October – and requested ECDC to take this schedule into account in order to avoid overlaps and also to consider participation in it.

Item 16: Memoranda of Understanding with:

EFSA *(document MB12/13)*

87. John O'Toole outlined the proposed MoU with EFSA. In response to a question raised earlier under item 9 it was agreed to add a provision concerning the possible situation of the two Agencies giving divergent scientific opinions.

88. Members called for more explanation as to why MoUs were required between EU Agencies at all. Further, questions were asked as to the intended level of such MoUs: whether they are intended to be general agreements for cooperation, in which case this was already covered by the Founding Regulation; or whether they are intended to be more precise, in which case it was felt that they do not currently contain enough detail.

89. The Director clarified ECDC's policy on MoUs. Regarding other EU Agencies, it is not the intention to conclude MoUs with all of them, but only the key public health actors (EMCDDA, EFSA, EMEA, EEA). MoUs should provide a general framework for collaboration, but should not be too specific in order to allow for flexibility. ECDC foresees annual meetings with the relevant agencies to jointly plan operations for the following year.

90. The representative of the European Commission stated that Article 3 of the Founding Regulation implies that no special arrangements (such as MoUs) are required. However, it is important to define the more detailed agenda as the Commission expects any joint work to be reflected in the budgets and work plans of the respective agencies. It is therefore important to have the planning as an Annex to the MoU.

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Joint Research Centre (*document MB12/14*)

91. There were no further comments on this document.

Swedish Rescue Agency (*document MB12/15*)

92. Denis Coulombier explained the background and rationale for this MoU and its advantages to ECDC.

93. The European Commission raised concerns over its compatibility with the Financial Regulation, as it could amount to an exclusive contract without a call for tender.

94. In response, Jef Maes outlined the key factors that needed to be taken into account: there are a limited number of providers in this area, and further, physical location is important; very small amounts are involved and would always be below the €60k threshold and usually below the €25k threshold.

95. However, he agreed that the point was a valid one and that these reasons should be made more explicit. Some internal rules would be developed. The EC accepted this solution.

96. There followed some discussion on the level of detail that should be included in such documents and to what extent the MB and AF should be consulted. Some members felt that if concrete steps have been agreed then they too should be presented to the Board.

97. The Director replied that the signature of these agreements remains the executive role of the Director. They are brought before the Management Board in order to inform them on strategic issues, although not strictly within the MB's mandate.

98. The Chair concluded by summarising that the MB agreed to the three MoUs here presented but noted that in future members would like to have more information on the content of any such agreement, with examples of the anticipated collaboration.

Item 17: Other matters

Upgrade of nine Temporary Agent posts

(*document MB 12/9 Rev. 1, 19 March 2008*)

99. As promised on the previous day (see item 7), ECDC's Jef Maes submitted a revised version of document MB 12/9, concerning the proposed upgrade of nine Temporary Agent posts. Corrections were included, and a clear explanation of recruiting rationales and budget implications was given. The cost increase was estimated between €20 000 and €40 000 for 2008, and up to €145 000 (2% of the staffing budget) for the 2009 budget. The revised document — upon MB request — was printed out in track change mode (to highlight editorial and content changes) and included an annex with a detailed 2008 establishment table and recruitment plan.

100. After a brief discussion, upgrading the nine Temporary Agent posts in the establishment table 2008 was approved with a great majority show of hands.

Third WHO/ECDC Joint Coordination Group meeting

101. Arun Nanda reported on the third WHO/ECDC Joint Coordination Group meeting in Stockholm (27–28 February 2008). ECDC met with WHO-Euro and also with WHO Headquarters. Issues discussed included IHR, surveillance systems, new case definitions

and technical collaboration. Full reports on both meetings will be made available to the MB soonest.

102. Responding to a question from the floor, the Director pointed out that geographical areas outside the EU/EFTA countries did not directly fall under ECDC's mandate, so whenever ECDC had to venture outside the EU, it did so together with WHO.

Public Health Genomics European Network

103. Jacques Scheres, representative of the EP, reported on the Public Health Genomics 3rd European Network Meeting in Cambridge, England (January 2008) that focused on infectious disease and genetic predisposition. One of the disease scenarios discussed involved people with a DNA profile that causes a specific co-infection when afflicted with primary-infection Chlamydia. On the other hand, some people appear to be genetically immune to certain infectious diseases. The Public Health Genomics European Network (PHGEN) tries to investigate the causality behind these infectious disease scenarios.

MB membership ending soon

104. The Director pointed out that MB membership for most members ends on September 28, 2008, except for Bulgaria and Romania, whose membership ends on 31 December 2010. A letter will be sent to the Permanent Representations to remind countries to reappoint or nominate new members. A new Chair and vice-Chair will be elected at the first meeting after September 28. The exact rules can be found in the Rules of Procedure. The Chair of the MB declared that he will not be able to chair the MB for another turn.

Next MB meeting

105. The next MB meeting will take place on June 17 and 18. The venue is Haikko Manor, 50 km northeast of Helsinki.

Departure of Julie Benichou

106. The MB, represented by the Chair, bid an emotional farewell to Julie Benichou, Administrative Officer Governance in the Director's Cabinet, who has accepted a new position at WHO Geneva.