

COVID-19 – PUBLIC POLICY IMPLICATIONS

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I. EUROPEAN UNION

- On 26 February, a **meeting of the Health Ministers** of Italy, Austria, France, Slovenia, Switzerland, Germany and Croatia took place in Rome with the participation of EU Health Commissioner Stella Kyriakides. The objective of the meeting was to define a common strategy to tackle the issue.¹
- The European Commission, which published on 26 February its country reports for the European Semester, has underlined that Italy’s public debt remains an important source of vulnerability for the economy, with “high risks” in the medium and long term. The Italian government has asked the EU to give Italy

¹ Health Ministry website, 27 February. Available at: <http://www.salute.gov.it/portale/nuovocoronavirus/dettaglioVideoNuovoCoronavirus.jsp?lingua=italiano&menu=multimedia&p=video&id=2043>

some leeway over its budget commitments because of coronavirus. The Executive Vice-President in charge of economy, Valdis Dombrovskis, stated that the Commission will be “flexible” with Italy and other Member States when assessing the compliance with EU fiscal rules.²

- On 2 March, [a press conference](#) was held by Commission President Ursula von der Leyen on the EU’s response to the COVID-19. During the press conference, the Commission President announced that the European Commission has launched the European coronavirus **response team** along with [a dedicated website](#). Five commissioners comprise the team and coordinate its work:
 - Commissioner for Crisis Management Janez Lenarčič is in charge of crisis management
 - Commissioner for Health and Food Safety Stella Kyriakides is in charge of all health issues
 - Commissioner for Home Affairs Ylva Johansson is in charge of border-related issues
 - Commissioner for Transport Adina Vălean is in charge of mobility
 - Commissioner for Economy Paolo Gentiloni is in charge of macroeconomic aspects
- Commissioner Stella Kyriakides announced the Commission is launching an **accelerated joint procurement for necessary protective medical equipment**.
- European Parliament President David Sassoli announced in a press conference held on 2 March that **external events and visits to the European Parliament will be cancelled and limited for three weeks**. This decision was posted [on the European Parliament’s website](#). On 5 March, President Sassoli announced that the Plenary session scheduled from 9 to 12 March will be held in Brussels instead of Strasbourg “for reasons of force majeure” as advised by the Parliament’s Medical Service.
- The COVID-19 crisis provides a good case study for the coordinating role of the European Union as foreseen by Article 168.5 TFEU which allows the European Council and the European Parliament to **adopt measures to combat the major cross-border health scourges**. With reference to this article, the Council and the EP adopted [Decision No 1082/2013/EU](#) on serious cross-border threats to health in 2013. This mandates the EU to conduct preparedness and response planning, epidemiological surveillance, joint procurement, establishment of an early warning and response system and the coordination of the necessary responses. Article 5 of Decision 1082/2013/EU sets out the rules for the **Joint Procurement for Medical Countermeasures** in the case of a cross-border health threat. However, this only foresees the participation of the EU Member States on a voluntary basis. This was set up as an answer to the competition between Member States for scarce medical resources in times of health crises (such as the H1N1 or Ebola). The current coronavirus epidemic constitutes the first major health threat that will test the efficacy of the Joint Procurement Agreement. It remains to be seen how effectively it will allow the Member States and the Commission to coordinate and fulfil objectives with regards to COVID-19.

² Il Sole 24 Ore, 26 February. Available at : <https://www.ilssole24ore.com/art/coronavirus-dombrovskis-sui-conti-dell-italia-saremo-comprensivi-ACtJU6LB>

- While the Commission President and the Commissioners stressed at the press conference the importance of coordinated approach between the EU institutions and Member States, national responses remain divergent to a high degree how COVID-19 is dealt with. Such a health threat has strong cross-sectoral effects ranging from healthcare, travel, transport, to the overall economy. With this in mind, and considering the application of Decision No 1082/2013, the distinction between Member State and EU competences in the field of public health becomes less clear.
- According to the most recent Rapid Risk Assessment published by the European Centre for Disease Prevention and Control (ECDC), “the risk for healthcare system capacity in the EU/EEA and the UK in the coming weeks is considered moderate to high”³. In its report, the ECDC outlines 4 scenarios for the possible progression of the COVID-19 outbreak. Current epidemiology suggests scenario 1 for EU/EEA level, which may be rapidly evolving to scenario 2:
 - Scenario 1 describes a situation with multiple introductions and limited local transmission in the country. Despite the introductions there is no apparent sustained transmission (only second-generation cases observed or transmission within sporadic contained clusters with known epidemiological links). In this situation, the objective is containment of the outbreak by blocking transmission opportunities, through early detection of imported and locally transmitted COVID-19 cases in order to try to avoid or at least delay the spread of infection and the associated burden on healthcare systems. Delaying the start of local transmission will allow the current influenza season to end, freeing up some healthcare capacity. As of 2 March 2020, several EU/EEA countries had reported limited local transmission and were considered to be in this scenario.
 - Scenario 2 describes a situation with increasing number of introductions and of more widespread reports of localised human-to-human transmission in the country (more than two generations of cases outside of sporadic clusters with known epidemiological links). In this situation, the objective remains to contain where practicable and otherwise slow down the transmission of the infection. This will increase the time available for development, production and distribution of PPE and effective therapeutic options, and would play a crucial role in reducing the burden on the healthcare system and other sectors, particularly if wider transmission of COVID-19 is delayed beyond the ongoing influenza season. A reduced burden would also allow for more time to increase laboratory capacity and increase surge capacity in healthcare services. All these measures will facilitate effective treatment of infected patients. Rapid collection and analysis of epidemiological and virological data will enable targeting of measures in this scenario and later. Within EU/EEA countries, Italy is currently in this scenario. Other countries in the EU/EEA might also be in this scenario, which may have undetected transmission ongoing due to lower level of case detection.
- On 6 March, the **Employment, Social Policy, Health and Consumer Affairs Council (EPSCO) held an extraordinary meeting** to discuss the latest developments regarding the COVID-19 outbreak. “Solidarity” was the key word of this meeting as most of the Member States stressed the need for collaboration and solidarity, in particular when it comes to exchange of information. In addition, some Member State representatives called on their

³ <https://www.ecdc.europa.eu/sites/default/files/documents/RRA-outbreak-novel-coronavirus-disease-2019-increase-transmission-globally-COVID-19.pdf>

colleagues to avoid unilaterally imposing export restrictions on medical equipment, while others stressed the need to look into making the European Union more self-sufficient in the production of health equipment and active ingredients for pharmaceuticals.

- During a videoconference that took place on 10 March, the Commission received a mandate to further step up its response to the COVID-19 outbreak. The Commission President, Ursula von der Leyen, announced in a press release published on the same day that a team of epidemiologists and virologists from different Member States will be established to provide guidelines on the EU level. In addition, **the Commission is taking stock of the available protective equipment and respiratory devices as well as their production and distribution capacity**. €140 million of public and private funding for research on vaccines, diagnosis and treatment has also be mobilised. The Commission President further stated that she will bring forward a Corona Response Investment Initiative directed at the healthcare systems, SMEs, labour markets and other vulnerable parts of our economies. In this context, a Task Force will be set up to work with Member States to ensure that the money starts flowing in the coming weeks.

II. ITALY

National level

- On 22 January, the Ministry of Health convened for the first time a **task force to coordinate the strategy** to tackle the spread of COVID-19 in Italy. The task force is composed of the General Directorate for Prevention, the NAS Carabinieri, the National Health Institute (ISS), the National Institute for Communicable Diseases ("Lazzaro Spallanzani"), the Usmaf (Maritime, Air and Border Health Offices), the Italian Medicines Agency (AIFA), the National Agency for regional healthcare services (Agenas) and the Diplomatic Counsellor.
- On 30 January, Italy **blocked all flights to and from China** for 90 days, in addition to those from Wuhan, already suspended by the Chinese authorities.⁴
- On 31 January, the Council of Ministers declared a **six-month state of emergency** as a consequence of the health risk related to the Coronavirus outbreak. The main actions concern the rescue and assistance of the population potentially infected by the virus, controls in airport and port areas, and the repatriation to Italy of citizens located in countries at risk.⁵
- An ordinance of 21 February of the Ministry of Health implemented a **14-day quarantine** for individuals who have been in close contact with confirmed cases of coronavirus and individuals coming from China's areas affected by the coronavirus.⁶

⁴ Health Ministry website, available at : <http://www.salute.gov.it/portale/nuovocoronavirus/dettaglioContenutiNuovoCoronavirus.jsp?lingua=italiano&id=5351&area=nuovoCoronavirus&menu=vuoto>

⁵ Department of Civil Protection - Presidency of the Council of Ministers. Available at: <http://www.protezionecivile.gov.it/risk-activities/health-risk/emergencies/coronavirus>

⁶ Health Ministry website, press release 22 February 2020. Available at: http://www.salute.gov.it/portale/news/p3_2_1_1_1.jsp?lingua=italiano&menu=notizie&p=dalministro&id=4083

- Citizens in the affected („red“) areas are allowed to do **teleworking**.⁷
- The Minister of Economy, Roberto Gualtieri, is currently negotiating with the Italian bankers' association (ABI) on a **temporary stop of instalment payments**.⁸
- On 24 February, a decree provided for the **suspension of the deadlines for the fulfilment of tax obligations** in favour of taxpayers affected by the epidemiological emergency of COVID-19.⁹
- On 25 February, the National Blood Centre decided to **stop blood donations for the next 28 days** from individuals who have been in China and those who have, since 1 February, transited and stayed in the Italian municipalities subject to urgent measures to contain the contagion. The Centre clarifies that this is a precautionary measure as there is no evidence of transmission of the virus through transfusion.¹⁰ On 2 March, the National Blood Centre informed that they have reduced the suspension of blood donations for the same category of individuals to 14 days, taking into account the latest recommendations of the European Centre for disease prevention and control (ECDC), the two latest reports of the World Health Organisation (WHO) and two decrees of the Prime Minister.
- The Prime Minister Giuseppe Conte adopted on 1 March a decree¹¹ that transposes and extends some of the measures already adopted for the containment and management of COVID-19 until 15 March and introduces further measures at national level:
 - Healthcare professionals must follow the preventive measures to tackle the spread of respiratory infections and apply the instructions for the sanitization and disinfection of environments provided by the Ministry of Health.
 - Information on preventive measures against the virus issued by the Ministry of Health must be displayed in schools, universities, offices and public agencies.
 - In public administration buildings, hospitals and other healthcare facilities, hand sanitizers are made available to employees, users and visitors;
 - Mayors and trade associations promote the dissemination of information on health and hygiene prevention measures in shops;
 - Public transport companies, including long-distance public transport companies, must implement special measures to sanitise vehicles;
 - Public and private bankruptcy procedures, where permitted, must be implemented to avoid overcrowding;

⁷ Health Ministry press release, 23 February. Available at: http://www.salute.gov.it/portale/news/p3_2_1_1_1.jsp?lingua=italiano&menu=notizie&p=dalministero&id=4086

⁸ ABI, ABI for corona virus emergency, 23 February. Available at: <https://www.abi.it/Pagine/news/Coronavirus1.aspx>

⁹ OJ, Decree, suspension of the deadlines for the fulfilment of tax obligations in favour of taxpayers affected by the epidemiological emergency by COVID-19, 24 February. Available at: <https://www.gazzettaufficiale.it/eli/id/2020/02/26/20A01299/sg>

¹⁰ National Blood Center, press release, 25 February. Available at : <https://www.centronazionalesangue.it/node/813>.

¹¹ Decree of the Prime Minister, 1 March. Available at: <http://www.trovanorme.salute.gov.it/norme/dettaglioAtto?id=73461>

- Anyone who has entered Italy, starting from the fourteenth day prior to the date of publication of the decree, after having stayed in areas at epidemiological risk or having passed through or stopped in the municipalities of the "red zone", must liaise with their GP, paediatrician or the competent public health services, which will proceed according to the protocol provided in the same decree.
- On 2 March, a decree-law¹² was adopted containing **urgent economic support measures for families, workers and companies**. The measures include:
 - Suspension of deadlines for payments and other obligations in the "red zone";
 - Measures to support families, employees and the self-employed and to strengthen the social shock absorbers in the 'red zone';
 - Measures in favour of those affected by the consequences, even indirectly, of the health emergency;
 - Measures affecting the tourism sector.

PM Conte also informed that the Government is developing further measures, soon to be approved, for economic support to citizens, families and businesses, related to the health emergency for the spread of COVID-19, and more globally for the economic growth of the country.

- The PM Giuseppe Conte adopted on 4 March another decree¹³ that **extends and introduces measures applicable on the national level**. The decree contains the following measures, **applicable until 3 April**, unless otherwise provided for in the individual measures:
 - 1) **Measures to fight and contain the spread of the COVID-19 virus throughout the country:**
 - **Suspension of congresses, meetings and social events**, in which **healthcare professionals** or other personnel in charge of carrying out essential public services or public utilities **are involved**. Any other convention or conference is also deferred until after the expiry of this decree;
 - Suspension of any cultural events or performance in places which involve crowds of people and cannot comply with the safety distance of at least one meter between people;
 - Suspension of sports events in the most affected towns. In the rest of the territory, sports events are allowed provided that they take place without public.
 - Closure of schools and universities until 15 March, **except postgraduate courses related to the exercise of healthcare professions**.
 - Patients' accompanying individuals are prohibited from staying in the waiting rooms of the Emergency and Acceptance and First Aid (DEA/PS) departments, unless otherwise prescribed by the medical staff in charge;

¹²Decree Law- n.9, 2 March. Available at: <https://www.gazzettaufficiale.it/eli/id/2020/03/02/20G00026/sg>

¹³ Decree of the Prime Minister, 4 March. Available at: <http://www.governo.it/it/articolo/coronavirus-firmato-il-dpcm-4-marzo-2020/14241>

o **Restricted access of relatives and visitors to hospitality and long-term care facilities**, nursing homes (RSAs) and residential facilities for the elderly.

2) **Information and prevention measures throughout the national territory.**

This section includes recommendations for the elderly, information and precautionary measures that the healthcare staff needs to provide and adopt when dealing with a person who might infected with the virus.

- On 8 March, the PM signed a decree¹⁴ providing for new emergency measures restricting movement for over 16 millions of citizens to contain the spread of coronavirus. The measures extended the quarantine to the entire Lombardy region (which includes Milan) and 14 other provinces in the North of the country (Piedmont, Emilia-Romagna, Veneto, and Marche) until 3 April. Residents in these new 'red zones' are not allowed to leave their homes, except for urgent health reasons and proven professional reasons.
- On 9 March, the PM signed a decree¹⁵ extending the restrictive emergency measures already adopted for the Lombardy region and other provinces to the entire country. The main measures, effective until 3 April, are the following:
 - o People can leave their homes only for proven professionals, health and necessity reasons. These justifications must be certified by self-declaration;
 - o All forms of gathering of people in public places or places open to the public are prohibited;
 - o Bars and restaurants can only be open from 6 to 18, with the obligation to ensure that the interpersonal distance of at least one metre is respected;
 - o Closure of shopping centres and markets on public holidays and weekends. Closure is not arranged for pharmacies, parapharmacies and grocery stores. Interpersonal distance of at least one metre must be ensured.
 - o Sports events and competitions of any order and discipline, in public or private places, are suspended.
 - o Activities of gyms, sporting events, social and cultural centres are closed.
- On 9 March, a decree¹⁶ was adopted to support and strengthen the national health system. In order to implement the extraordinary measures immediately, the decree provides for the allocation of €845 million for 2020 (of which €660 million for personnel and €185 million for the purchase of intensive care equipment).

¹⁴ Decree of the Prime Minister, 8 March. Available at: http://www.governo.it/sites/new.governo.it/files/DPCM_20200308.pdf

¹⁵ Decree of the Prime Minister, 9 March. Available at : https://www.gazzettaufficiale.it/atto/serie_generale/caricaDettaglioAtto/originario?atto.dataPubblicazioneGazzetta=2020-03-09&atto.codiceRedazionale=20A01558&elenco30giorni=false

¹⁶ Decree-Law, 9 March. Available at: https://www.gazzettaufficiale.it/atto/serie_generale/caricaDettaglioAtto/originario?atto.dataPubblicazioneGazzetta=2020-03-09&atto.codiceRedazionale=20G00030&elenco30giorni=true

The main emergency measures are the following:

- Recruitment of residents and assignment of self-employment tasks to health care personnel, including retired healthcare professionals, as well of special recruitment of GPs and paediatricians;
 - Redetermination by the Regions of the staffing needs plans of companies and NHS bodies;
 - Establishment of special care units for people resulting positive to the Corona virus but not hospitalised;
 - Establishment (through a decree of the Minister of Health) by 31 July 2020 of modalities ensuring the supply of oxygen and recharge of portable devices that provide oxygen therapy;
 - Simplification measures for the purchase of medical devices;
 - Allocation of 185 million euros for 2020 to purchase 5,000 assisted ventilation systems and related materials essential for the functioning of fans.
 - Suspension of non-urgent hospitalisation and outpatient and non-urgent procedures.
 - Provisions on maximum working time limits are temporarily not applicable to healthcare professionals involved in the corona virus emergency, if they are adequately protected.
- A decree¹⁷ providing economic measures (equivalent to 12 billion) for companies and workers facing the effects of the restrictive measures adopted by the Government is expected to be adopted by 13 March.

Regional level

- Two ordinances from the Health Minister and President of Lombardy region:
 - implemented the isolation of 11 municipalities in the Lombardy region;
 - extended some precautionary measures to the entire Lombardy Region, e.g. closure of schools, universities, museums, cinemas, theatres.¹⁸
- Other regions, especially neighbouring regions (i.e. Veneto, Piedmont, Emilia-Romagna, Liguria, Trentino- Alto Adige) decided to close schools and universities and to adopt other precautionary measures (e.g. ban on sports events). The precautionary measures have now been extended to the entire national territory.
- Following the publication of the leaked draft decree on the new 'red zones' before its approval, many Italians left the new 'red zones' in a hurry on the night of March 7-8 to move to the South. For this reason, many other Regions (Lazio ,Puglia, Campania, Calabria, Molise, Sicily, Sardinia) on 8 and 9 March passed an ordinance requiring individuals coming from the 'red zones' or who have been in those areas in the past 14 days (with exceptions) to communicate

¹⁷ Rainews, 11 March, Available at: <http://www.rainews.it/dl/rainews/articoli/Coronavirus-Conte-Stanziati-fino-a-25-miliardi-per-emergenza-ok-a-scostamento-deficit-4a9093d5-1662-4338-8849-c4bd151cfabd.html>

¹⁸ Health Ministry website, available at : <https://www.corriere.it/infografiche/2020/02/ministero-salute/ministero-salute.pdf>

it to the regional toll-free number, stay at home for 14 days, observe the ban on travel and to remain reachable for any surveillance activities until the assessment by the prevention department.

III. FRANCE

- The new Health Minister, Olivier Véran, has made the COVID-19 crisis the priority of his Ministry. An overview of the situation is provided to the press everyday by the Minister. The French President, Emmanuel Macron, cleared his agenda for the week of 2 March to focus on the issue.
- Since 10 January, the French Health Ministry has been sending prevention documents to inform healthcare professionals about COVID-19. The Pasteur Institute has developed a **diagnostic test**. 108 French hospitals are ready to treat people infected by COVID-19 across the country, and diagnostic tests are available in all those hospitals¹⁹.
- On 25 January, after the first reported cases in France, an **identification and tracking system** was put in place by the Health Direction of the Regions.
- Most of the French airlines **have cancelled their flights to China**, and the repatriation of the French citizens living in China has been ongoing since 31 January. French airlines also advise the population to postpone trips to Italy if possible. The Foreign Affairs Ministry also advises to avoid Italian areas that are affected by COVID-19 and to cancel their trips to China.
- On 29 February, level 2 of the **national prevention plan** was triggered by the government resulting in the **cancellation of all gatherings of more than 5,000 people in a closed area**. The Paris half marathon was cancelled while the international agricultural was shortened.
- **Hundreds of schools are closed until 14 March** to prevent the spread of the virus in infected areas (Departments of *Oise*, *Haut-Rhin*, and *Morbihan*, and the city of *Ajaccio*).
- **Between 15 and 20 million of masks will be sent to pharmacies and doctors** in the coming days, while the Health Minister, Olivier Véran, announced that 260 million euros will be allocated to supporting hospitals facing the epidemic.
- The French President, **Emmanuel Macron**, stated on 5 March: "*We all know it, the epidemic is inexorable*". He called for an extraordinary session with the Health Minister and thirty experts on the issue on 5 March, to discuss and find coordinated solutions.

¹⁹ Information taken from the government's official website.

- The French **Minister of Finance** issued a decree on 6 March framing and limiting the price of hydroalcoholic gel in order to avoid any speculation on this product.
- The French **Minister of Health** issued a decree on 6 March authorizing the pharmacies to prepare themselves and sell hydroalcoholic gel, to limit shortages of disinfectants due to panic buying.
- On 8 March, a new extraordinary Defence Council was held by the President. At the end of the meeting, the **Minister of Health**, Olivier Véran, announced the **automatic cancellation of all gatherings of more than 1000 people**. Some exceptions to this ban are planned for exams, use of public transports... Concerts, sports events are all cancelled.
- On 8 March, Olivier Véran also announced measures to facilitate **telemedicine** and to avoid massive spread of COVID-19 in the waiting rooms.
- The French **National Assembly** has reported **five MPs** and two staff members infected by the virus, generating fears about a contamination within the Parliament. Access to the National Assembly is limited for 2 weeks.
- The Minister of Finance announced on 9 March special measures regarding short time working arrangements, **social security costs, tax for companies**, in order to mitigate the economic impact of the epidemic on businesses.

IV. GERMANY

- An expert press conference on the COVID-19 virus was held by the Federal Minister of Health Jens Spahn, Prof. Dr. Gastmeier (Institute for Hygiene and Environmental Medicine), Prof. Dr. Tannich (Bernard-Nocht-Institute for Tropical Medicine), Prof. Drosten (Charité Berlin), and Prof. Dr. Wieler (Robert Koch Institute) on 2 March.
- Federal Minister Jens Spahn explained that **all relevant measures have been taken to support involved actors of the health sector** sufficiently. The Federal Minister of Health recommends people with symptoms to stay home and consult a medical doctor, an official hotline or website.
- **Direct flights to China will not be cancelled.** Minister Spahn stressed the need to avoid unnecessary panic, especially on social media platforms.
- The Federal Ministry of Health initiated an **awareness campaign** on national, state and local level as well as on social media. Moreover, hotline capacities have been extended following the public onslaught.
- In reaction to the panic buying that took place in several German cities, Jens Spahn explained that the food supply in Germany is secured.

- The National Association of Statutory Health Insurance Physicians (KBV) emphasised that the standard operation of health care facilities must be maintained. **Tests for COVID-19 are fully reimbursed by statutory health insurances.**
- Last week, the Federal Health Ministry and the Federal Ministry for Internal Affairs established a **crisis committee on COVID-19**. The committee provides a concrete risk assessment as well as advice to all citizens.
- In light of the increasing number of people affected with COVID-19, **several major events have been cancelled**. On 3 March, the Leipzig book fair (Leipziger Buchmesse) welcoming over 250 000 people each year as well as other fairs such as the International Crafts Fair (IHM) in Munich have been cancelled. **Large-sized companies** such as BMW, media company Pro Sieben Sat 1 as well as financial service provider Wirecard **have sent their employees home** in reaction to COVID-19.
- Pandemic plans are well-established in Germany, a very good disease alert and notification system and pandemic plans. In addition, regular emergency drills are conducted at airports in Germany. The Robert Koch Institute is responsible for coordination and information and has developed guidelines on the cancellation of events and recommends to cancel or re-schedule conferences where crowds and high contact between participants is expected.
- Measures in cross-border transport to Germany will be intensified on all transport routes. Carriers of passengers arriving in Germany by plane, ship, train or bus from China, Iran, Italy, Japan, South Korea must provide their passengers with instructions on how to behave in order to prevent illness or in case symptoms of illness occur.
- On 4 March, the Federal Ministry of Economy released an ordinance prohibiting the export of masks, gloves and protection suits. Exceptions are only permitted under strict conditions.
- Concerns have been raised in relation to access to medicines. Party leader of the Christian Democrats, Ralph Brinkhaus, stressed that European pharmaceutical dependencies on countries such as India or China must be minimised. To date, about 26% of generics on the European market are dependent on India. According to Mr. Brinkhaus, economic independence must not only be ensured when it comes to the health sector but also in other economic fields.
- Federal Health Minister **Jens Spahn announced that consultations on medicines shortages will be initiated at EU level.**
- The Association of German Pharmacies (ABDA) announced that pharmacists are allowed to prepare disinfectants. As such, pharmacies react to current shortages of disinfectants due to panic buying. Previously, such procedure was forbidden by law. With a temporary authorisation, German policy makers created a measure tackling the challenge of maintaining the supply of disinfectants that are particularly needed by health workers and patients.
- On 5 March, the Robert Koch Institute listed different regions in China, Iran, South Korea as well as Italy as “at-risk areas”. South Tyrol (Italy) was newly added to the list of areas in which ongoing community transmission of COVID-19 is taking place.

- On 9 March, another expert press conference with German Federal Minister Jens Spahn, Lothar Wieler (Robert Koch Institute) and Christian Droste (Charité Berlin) took place. The experts stated that 80% of COVID-19 cases in Germany indicate a mild course of disease but argued that the spread of COVID-19 must be limited.
- Although, this would ultimately be the competence of local health authorities, the cancellation of events with more than 1000 participants is recommended. Moreover, Minister Spahn encouraged the general public to integrate general precautions in daily life. As such, contacts with a high number of people should be minimised and hand washing hygiene fully respected. Travel should be re-arranged or cancelled.
- Minister Spahn explained that the priority is now to secure the health supply chain e.g. sufficient number of beds in intensive care units and ventilation facilities. Although the German health system is well equipped, he emphasised intensive exchange with his counterparts from Italy, France and Great Britain. In reaction to the COVID-19 pandemic, the German stock exchange went down by 8%. This illustrates the biggest daily loss in nearly 18 years.
- In a press statement, the Institute of German Economy (Institut der deutschen Wirtschaft) called on German policy makers to take measures to maintain economic stability. As such (1) the stabilisation of the health system, (2) the liquidity of companies, (3) the stabilisation of financial markets, (4) tax deferrals for companies (particularly small- and medium-sized) as well as (5) the stabilisation of employments rates through short work shall be ensured.
- The COVID-19 crisis committee of the Ministry of the Interior and the Ministry of Health recommends the cancellation of all major public and private events with more than 1000 participants. Bavaria, Bremen, North Rhine-Westphalia and Schleswig-Holstein and Baden-Württemberg have already done so or are planning to do so. Hesse recommends the cancellation.
- On 11 March, Chancellor Merkel joined Health Minister Jens Spahn and head of the Robert Koch Institute Lothar Wieler in an expert press conference. She emphasised that nearly 70% of people living in Germany could be infected with COVID-19. Accordingly, she encouraged the general public to respect prevention measures such as the limitation of social contacts and a general hand hygiene. The overall aim is the limitation of the spread of COVID-19.
- With respect to the impact of COVID-19 on Germany's economy, Mrs. Merkel referred to the planned presentation of economic measures that will be presented by Federal Minister of Finance Olaf Scholz and Federal Minister of Economic Affairs Peter Altmeier on 13 March. Chancellor Merkel contradicted the comparison of the economic impact of COVID-19 with that of the financial crisis in 2008. In the night from 10 March to 11 March, there was a telephone conference with relevant financial stakeholders including Angela Merkel as well as Christine Lagarde, head of the European Central Bank (ECB).
- The Federal government announced to present strategies for the support of economic liquidity on 13 March.
- On 5 and 6 March, blood donations decreased significantly by nearly 50% due to the COVID-19 situation. Consequently, affected stakeholders such as the German Red Cross initiated an awareness campaign that aims to inform the general public about the possibility of blood donations in times of COVID-19.

V. SPAIN

- Spanish Health Ministry Salvador Illa declared on 10 March that Spain is within a **forced containment scenario** and announced several measures to face COVID-19 both for risk areas (the region of Madrid, the city of Vitoria and the town of Labastida in the Basque Country) and for the whole territory. The measures are as follows:
 - The Council of Ministers modified the [decree](#) on health products supplies to allow the centralised supply of all kind of health products needed to tackle the virus;
 - The Council of Ministers approved a [decree](#) to consider, amongst other measures, those affected with COVID19 or those in preventive isolation under “temporary disability due to professional contingencies”, which will have an impact on potential employee compensations;
 - Cancellation of direct flights from Spain to Italy from 11 March to 25 March;
 - Cancellation in risk areas of all events held indoors with over 1000 participants.
- Both the Congress and the Senate have temporarily stopped their parliamentary activity, except for the Health Committee, and extraparliamentary activities and visits have been cancelled. Plenary sessions are expected to resume next week, according to a statement issued by the President of the Congress.
- 17 500 COVID19 tests have been undertaken so far.
- The Spanish Health Minister provides official updates on COVID19 twice per day, such as the one published [on 10 March](#). Besides, regions and the government have virtual interterritorial meetings twice per week to ensure smooth coordination on the matter.
- Prime Minister Pedro Sánchez stated on 9 March that the government is working on an **Emergency Plan against COVID19** along with social agents, which will be released as soon as possible. The Plan will most likely include economic measures to attenuate negative effects in companies, individuals and the healthcare system.
- In risk areas **day centres for elderly people, universities and schools have been closed** as a containment measure.
- Fernando Simón, director of the Coordination Centre for Alerts and Health Emergencies, reported on 9 March that Madrid and the Basque Country are to be considered as areas with **community transmission**, although he insisted on the fact that the healthcare system is strong enough to manage the situation. Nonetheless, third countries could classify Spain as a risk country.
- The Minister has urged citizens to follow recommendations provided by health authorities.

The Ministry of Health published on 27 February [a protocol](#) on how to proceed in general terms when COVID-19 is diagnosed. On 5 March, the Ministry published another [protocol specific for healthcare professionals](#), after the latter criticised the first protocol for being too generic.

- The Ministry of Health also **limited blood donations to prevent donations from at-risk donors**. As such, the Scientific Committee for Transfusion Safety and the National Transplant Organisation followed the European Centre for Disease Prevention and Control's recommendations and urged healthcare centres to **suspend blood donations for 21 days and organs and tissues donations for 28 days after the first risk exposure** (contact with a patient or trip to Hubei, China), and to suspend blood, organs and tissues donations for donors with symptomatic cases for a month after symptoms disappear.
- An extraordinary interterritorial meeting on COVID-19 took place on 5 March. According to the government of the region of Murcia, the Ministry of Health is expected to set additional prevention measures such as limiting the number of visitors in hospitals or suspending the presence of representatives from medical devices and pharmaceutical companies.

VI. UNITED KINGDOM

- The UK has closely monitored the outbreak of COVID-19 since first reports were confirmed in China. As the virus spread to Europe, the government have been reassuring the public from 24 January that the National Health Service is extremely well-prepared for managing and preventing the further spread of the virus.
- On 10 February, the Secretary of State for Health and Social Care, Matt Hancock, announced **strengthened legal powers to protect public health** under the Public Health (Control of Disease) Act 1984. The Health Protection (Coronavirus) Regulations 2020 were put in place with immediate effect to **impose restrictions** on any individual considered by health professionals to be at risk of spreading the virus. The regulation allows health professionals to be confident of the powers to detain individuals suspected of having the disease, and designated several hospitals as "infection facilities". In Scotland, Health Boards have powers to place restrictions on individuals who are known to have the disease or have been exposed to the disease, while Wales and Northern Ireland, authorities can request powers from magistrates to isolate, detain or require individuals to undergo a medical examination.
- Throughout February, the UK Border Force and the Foreign and Commonwealth Office assisted the **repatriation of British nationals** and their dependants from affected areas overseas, including 83 British nationals from Wuhan, China and 30 British and 2 Irish citizens from a coronavirus-hit cruise ship in Japan.

- The **Department of Health and Social Care published a coronavirus action plan** on 3 March which sets out actions to date, future measures, cooperation between devolved political and health authorities, and the level of preparedness of the country's four National Health Services²⁰. The document draws comparison with the UK's high level of preparedness for pandemic influenza and has stated that the UK's system-wide response plans for pandemic influenza have been adapted for COVID-19, focused on the continuity of public and critical services and the stability of the economy. It outlines the government's objectives to deploy phased actions to **Contain, Delay, and Mitigate** any outbreak, using **Research** to inform policy development.
- The government has been working closely to ensure that measures are in place to satisfy that people returning or coming from places of concern are in good health.
- The Department for International Trade has been working around the globe to relay public health and travel advice and has been working with businesses to help minimise disruption.
- A key part of the government's approach is to delay the onset of an epidemic if it becomes inevitable. Measures include efforts to limit the spread of the disease through handwashing and 'catch it, bin it, kill it' for those with coughs and sneezes. The government hopes this will allow further time for the testing of drugs and initial development of vaccines/therapies and reduce the overloading on the health system.
- On 4 February, UK Research and Innovation and the Department of Health and Social Care made **£20 million available for research** focusing on contributions to the understanding, diagnosis, prevention and management of the virus. This fund is in addition to a further £20 million made available on 3 February to support the development of a vaccine.
- The Prime Minister chaired a government committee (COBR) meeting on 2 March to approve the action plan proposed by the Health and Social Care Secretary, and finalise responsive measures. As part of that strategy, the government will consider **banning large gatherings of people at events and measures to place cities on "lockdown"**. The government and health authorities continue to receive expert advice from each of the four nations' Chief Medical Officers and the Scientific Advisory Group for Emergencies.
- In the week commencing 2 March, the government launched a public health campaign to reinforce the importance of handwashing in limiting the spread of disease.

²⁰ Department of Health and Social Care, available at: <https://www.gov.uk/government/publications/coronavirus-action-plan/coronavirus-action-plan-a-guide-to-what-you-can-expect-across-the-uk>

- On 6 March, Chief Medical Officer for England (Professor Chris Whitty) and Deputy Chief Medical Officer for England (Jenny Harries) gave evidence to the House of Commons' Health and Social Care Committee on coronavirus preparation. The CMO confirmed that the UK is more in the 'delay phase' of the UK's action plan than the 'contain phase' but stressed that there would be no hard step from one phase to the next.
 - The government's intention behind the delay stage is to 1) push back the peak of transmission to increase capacity in the NHS 2) to allow more time for the government to increase its understanding of the virus to develop its response and countermeasures. It is not to reduce prevalence overall.
 - Official modelling suggests that 50% of cases will appear over three weeks, while 95% of cases will appear over 9 weeks. As a result, there will be a significant strain on the NHS for a relatively short period of time. Modelling will be used to bring forward or postpone other planned procedures in the NHS, with a relatively low impact on physical health.
 - As part of the delay phase:
 - Older people and those with pre-existing medical conditions may soon be told to avoid large gatherings.
 - Geographical information will be made available to the public to help them inform decisions on travel.
 - The decision to effect social and economic behaviour, such as lockdowns and prohibiting the assembly of groups will be considered on an individual basis, judged on the impact on the increasing the delay, reducing mortality, and spreading out the peak.
 - The government is likely to adopt an approach which makes information much more readily available to the public to help them inform decisions, and reassure individuals of the relatively low risk, even among vulnerable groups.
- The Department of Health and Social Care announced on 8 March its plans to put forward a COVID-19 emergency bill before Parliament later this month which will include measures to ensure the public sector can continue to exercise duties in the eventuality of restrictions on assembly, rising self-isolation and city-wide lockdowns.
- The eventual act will be enforceable for a period of two-years due to the presence of a 'sunset clause' and will only be activated upon medical recommendation. The bill will feature:
 - Employment protection for volunteers who assist the health and social care system in its response to COVID-19, including the right to volunteer in place of full-time employment during a widespread pandemic.
 - Measures to allow civil cases in magistrates' courts to be held over telephone and video, and the expansion of audio and video live links for criminal proceedings.

- As part of the UK Government's approach to making information on COVID-19 more readily available to the public, Public Health England launched an interactive dashboard tool on 10 March which displays reported cases of coronavirus in the UK, and at local level in England, new confirmed cases each day, and the number of deaths attributed to the virus²¹.
- Late on the evening of 10 March, Health Minister Nadine Dorries confirmed that she had tested positive for COVID-19 and is self-isolating. The Minister had signed a statutory instrument on Friday 6 March which designated coronavirus as a 'notifiable disease' having likely already being infected. The announcement is particularly concerning for 10 Downing Street and the Parliamentary authorities who will need to decide whether to close the UK Parliament to prevent further transmission. Reports that another Member of Parliament, Rachael Maskell, has also self-isolated will add further pressure to make a decision within the coming days.
- The Chancellor of the Exchequer, Rishi Sunak, today (11 March) delivered a Budget Statement which announces the state of the UK finances and the government's plans for tax and spending measures. This Budget Statement was dominated by the announcement of an emergency economic response to the outbreak of COVID-19. The Chancellor announced a £12 billion plan to provide support for public services, individuals and businesses, whose finances are affected by COVID-19. This includes a £5 billion COVID-19 response fund to ensure the NHS and other public services receive the funding they need to respond to the outbreak as the situation develops. The Chancellor also announced a Coronavirus Business Interruption Loan Scheme to support up to a further £1 billion lending to SMEs and a £2.2 billion grant scheme for small businesses.
- Prior to the Chancellor's Budget statement, the Bank of England announced an emergency cut in interest rates to try to stimulate the economy amid the outbreak of COVID-19.

²¹ Public Health England, available at: <http://gov.uk/track-coronavirus>