

Disclaimer: We kindly ask to acknowledge that due to the diverse and heterogeneous nature of the questions and the dynamic pandemic situation some of the information might be incomplete or only correct for the time being. Thus, please consider the date and date of the last update with the below information. All available information was provided by a country representative from the PHIRI network during or in connection to the respective meeting.

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Table 1: Country response: Long-term pandemic surveillance strategies

Country	Topic: Long-term pandemic surveillance strategies <ul style="list-style-type: none"> • Was the 'state-of-emergency' activated in your country when the pandemic hit, or other emergency legislation set in place in order to set up a COVID-19 monitoring and surveillance system, including regulations for data access and linkage of data sources? • Did your constitution already include such mechanisms before COVID-19? • In terms of future preparedness strategies, as this state of emergency or emergency decrees are temporary, what will happen to your COVID-19 monitoring mechanism on the long run? Has a long-term strategy been developed to ensure the continuity of surveillance of COVID-19 and research? 	Was there an emergency legislation before COVID-19?	Has a long-term strategy been developed to ensure the continuity of surveillance of COVID-19 and research?
Austria	<p>A formal activation of a "state of emergency" is not provided in the Austrian constitution. Instead, the Epidemics Act applied, which exists since 1950 and has been amended several times during this pandemic. https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=10010265. The information provision and data reporting periods for hospitals e.g. have been shortened considerably during the activation of the Epidemics Act, speeding up monitoring of COVID-19, but it is unclear if they will return to the previous schedule soon. Another challenge for long-term surveillance is presented by the fact that similar to other countries who reported, data collected during application of the Epidemics Act will have to be deleted quite soon after the Act is lifted. Austria is currently exploring what long-term strategies can look like to ensure impactful surveillance and monitoring of COVID-19 given these constraints and appreciates the exchange with other countries on this matter."</p>	Yes	No, but exploration ongoing
Belgium	<p>In Belgium, In the beginning of the crisis, the legal framework for crisis management and measures were mainly based on Royal Decrees, without much parliamentary control. That's why since last year, the Parliament voted the Pandemic Law which is a legal framework that allows taking measures in epidemiological emergency situations for 3 months. This Pandemic Law was recently extended for another 3 months. Apart from that Pandemic Law, several Collaboration agreements were made between different federal and federated actors to give a legal framework to data collection, sharing, analysis, for contact tracing and other COVID-19 related activities. The Problem with the Collaboration agreements is that they will stop once the state of the epidemic is declared over, and that the Belgian health data platform is obliged to destroy the data within a certain period (some database have to be deleted within 5 days). These agreements have been extended, until mid-2022. For Belgium, it is clear that a long-term solution is needed to guarantee access to (COVID) data. As many databases are linked, changing or stopping one database or data collection could have a major impact on surveillance and research.</p>	Partly, but a new mechanism was then created	No, but exploration ongoing
Bulgaria	<p>The 'state-of-emergency' was activated in Bulgaria on the 13 of March 2020.</p> <p>The first decision of a state of emergency in connection with the spread of COVID-19 was declared by the National Assembly of the Republic of Bulgaria on 13.03.2020, and the next one - for an emergency epidemic situation was declared on 14.05.2020.</p>	Yes	Yes



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	<p>According to the Article 84 (12) of the Bulgarian Constitution the National Assembly of Republic of Bulgaria has the right declare to the state of military or other emergency on the proposal of President or Council of Ministers.</p> <p>A new LAW “on measures and actions during the state of emergency declared by decision of The National Assembly of March 13, 2020, and for overcoming the consequences” was published at No. 44/2020 of State Newspaper, effective 14.05.2020, last amendment 18.02.2022.</p> <p>From the very beginning of the COVID – 19 pandemic the implementation of ANTI COVID-19 measures in Bulgaria are introduced by orders of the Bulgarian Minister of Health, amended and supplemented from March 2020 till now. Depending on the development of the epidemic situation, anti-epidemic measures were gradually introduced in accordance with the recommendations of the WHO and European structures.</p> <p>Information on anti-epidemic measures is provided on the websites of the Ministry of Health, National Center for Infectious and Parasitic Diseases and the National Center for Public Health and Analysis (NCPHA) and later on the COVID-19 Unified Information Portal. Information on anti-epidemic measures is also published on the websites of Regional Health Inspectorates, occupational health services, non-governmental organizations and others.</p> <p>The construction of Unified Information Portal for COVID-19, which collects current information on the state of the epidemic process and provides valuable guidance for political decision-making about the pandemic in Bulgaria on daily basis was accelerated by the pandemic https://coronavirus.bg.</p> <p>The National Health Information System (HIS) was developed under the Grant Agreement (GFPA) № BG05SFOP001-1.002-0007 of 21.03.2017, under the project "Completion of the National Health Information System (NHIS) - stage 1 and stage 2" with the beneficiary - the Ministry of Health. The project is implemented with the financial support of the Operational Program "Good Governance" with the support of the European Structural Funds. During the pandemic, the long-awaited electronic prescription was introduced as part of the National Health Information System (HIS). The need for such a system with an electronic patient file with all the attributes required by the NHIF became very urgent during the pandemic, especially with regard to the epidemiological studies of the infected patients and the limited ability to track the survivors.</p> <p>The HIS was further developed as a national platform for COVOD -19 vaccination and green certificates https://www.his.bg/bg/reservation.</p> <p>Has a long-term strategy been developed to ensure the continuity of surveillance of COVID-19 and research?</p> <p>National Operational Plan for Tackling the COVID-19 Pandemic was adapted by the Council of Ministers on 14 of January 2022.</p>		
<p>Czech Republic</p>	<p>State of emergency was activated 12.3.-17.5.2020 and 5.10.2020-11.4.2021 and 26.11.-25.12.2021, but was not strictly needed for monitoring purposes. Is not in place anymore currently. Monitoring systems already existed before the pandemic. New modules were added during the pandemic to collect new types of information. New pandemic legislation was recently adopted, but it contains no data collection legislation, as existing legislation is sufficient to cover needs of COVID-19 surveillance. However, the new legislation sets new standards on what kind of information should be provided to the public, and what kind of data needs to be shared with the public at regular intervals during a state of emergency.</p>	<p>Yes</p>	<p>N/A</p>



Germany	<p>In the German Infection Protection Act (IfSG), there has always been the "§ 15 Adaptation of the reporting obligation to the epidemic situation", so that regulations for the adaptation of surveillance could be implemented here very quickly (see also: Adaptations in the reporting system: https://link.springer.com/article/10.1007/s00103-021-03298-w, Adaptation of further surveillance systems: https://link.springer.com/article/10.1007/s00103-021-03303-2).</p> <p>For the implementation of nationwide measures, additional adaptations were necessary and new legal frameworks were created, including "§ 5 IfSG Epidemic situation of national concern" (public health emergency of national concern).</p> <p>Pandemic plan and strategy papers: https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/ZS/Pandemieplan_Strategien.html</p> <p>Currently, adjustments to the strategy are also being discussed for COVID-19, but have not yet been published.</p>	Yes	No, but exploration ongoing
Italy	<p>The 'state-of-emergency' was activated in Italy on the 31st of January 2020. On 14th of December, the government decided to stop it on the next 31st of March 2022. The state of emergency in Italy is governed by the law n. 225. The Article 5 states that the state of emergency can be resolved by the Council of Ministers, on the proposal of the Prime Minister, upon the occurrence of "natural disasters, catastrophes or other events which, due to their intensity and extent, must be dealt with extraordinary means and powers".</p> <p>During a state of emergency, the Prime Minister may issue ordinances in derogation from any current provision, aimed at avoiding dangerous situations or greater damage to persons or property. Thanks to the state of emergency, it was therefore possible to issue all those measures that limited personal freedom during the period of the pandemic, for the containment of infections. The state of emergency also allowed the establishment of the Technical Scientific Committee (CTS) and the commissioner structure of the Civil Protection.</p> <p>Thanks to the 'state-of-emergency', that consented to provide 'exceptional', but temporary, norms and decrees, an integrated surveillance system on COVID-19 pandemic was settled up and coordinated by the Italian National Institute of Health (Istituto Superiore di Sanità-ISS) to collect individual health information and data on hospitalization, deaths, treatments, vaccination, etc. including individual personal identification information. Data access and data linkage are regulated and limited to the COVID-19 surveillance system of ISS for monitoring infection and deaths, and to Ministry of health and Civil Protection for green pass management and vaccination. One of the main objectives of the COVID-19 surveillance system is to monitor the pandemic and provide updated and evidence based information to the national Scientific and Technical Committee (CTS); the CTS provides scientific information to the political government that takes all the political decisions to face the pandemic and protect the health of population. Regions, Local health Units, and hospitals were involved to provide data to feed the COVID-19 integrated surveillance system. All the personal information were protected and used under very limited and restricted conditions and rules related to COVID-19 pandemic for health and research purposes, green pass management, and vaccination monitoring. Also Civil Protection was involved and allowed to collect data and implement activities to monitor and organise hospitals, long term care facilities, and vaccination hubs overall the country in order to translate political decisions in specific actions on the territory.</p> <p>In theory, the Technical Scientific Committee (CTS), the commissioner structure of the Civil Protection, and the integrated surveillance system on COVID-19 pandemic of the Istituto Superiore di Sanità-ISS, that were settled up thanks to the 'state-of-emergency', should be closed when the 'state-of-emergency' will be closed on the 31st of March 2022. At the moment, no decisions were taken on the maintenance of these organisms and systems dedicated to COVID-19 after the closing of the 'state of emergency'; such issues are still under discussion.</p>	Yes	No, but exploration ongoing
Lithuania	<p>The decision of a state of national emergency situation in connection with the spread of COVID-19 was declared by the Government of the Republic of Lithuania of 26 February 2020,</p>	Yes	N/A



	<p>In pursuance of Article 6(1)(e), Articles 25 and 27 of Regulation (EU) 2016/399 of the European Parliament and of the Council of 9 March 2016 on a Union Code on the rules governing the movement of persons across borders (Schengen Borders Code); Article 8 and Article 9(11) and (19), Article 21(2)(1) and Article 26(1)(2) of the Law on Civil Protection; Article 10 of the Law of the Republic of Lithuania on the State Border and the Guard Thereof; Article 3(1)(1) of the Law of the Republic of Lithuania on a One-time Payment for Those Vaccinated Against COVID-19 Disease (Coronavirus Infection); Article 18(7) of the Law of the Republic of Lithuania on the Prevention and Control of Communicable Diseases in Humans; and having regard to the proposal from the meeting of the Emergency Commission of the Government of the Republic of Lithuania; and with a view to protecting the population and the environment against the entry and spread of COVID-19 disease (coronavirus infection), as well as preventing a new outbreak of COVID-19 disease (coronavirus infection) in the territory of the country, the Government of the Republic of Lithuania has r e s o l v e d to declare a national emergency due to the threat of the spread of COVID-19 (coronavirus infection) and the secondary (enhanced) level of preparedness of the civil protection system 26 02 2020..</p> <p>From the very beginning of the COVID – 19 pandemic the implementation of ANTI COVID-19 measures in Lithuania are introduced by resolutions of Government, orders of the Lithuanian Minister of Health, amended and supplemented from March 2020 till now. Depending on the development of the epidemic situation, anti-epidemic measures were gradually introduced in accordance with the recommendations of the WHO and European structures.</p> <p>Information on anti-epidemic measures is provided on the websites of the Ministry of Health, National Public Health Center and Statistics Lithuania, and later on the COVID-19 Unified Information Portal Corona Stop. Information on anti-epidemic measures is also published on the websites of national institutions, non-governmental organizations and others.</p> <p>The construction of Unified Information Portal for COVID-19, which collects current information on the state of the epidemic process and provides valuable guidance for political decision-making about the pandemic in Lithuania on daily basis was accelerated by the pandemic https://osp.stat.gov.lt/praejusios-paros-covid-19-statistika.</p>		
Malta	<p>State of emergency was deactivated in June 2020. The tools and mechanism that were used during COVID-19 were not part of the state of emergency legislation. There is specific legislation for secondary use of data in compliance with GDPR in circumstances such as during the pandemic. This existing legislation was sufficient to allow the data flows needed to monitor COVID-19. In terms of overall long-term strategies, Malta is hoping to keep a minimum testing level active in the country even while de-escalating other NPI measures. One potential challenge to long-term surveillance is presented by the fact that a main source of routine surveillance during COVID-19 were hospital admissions with associated tests before admission, but hospital administrations are pushing back against functioning as the main source of routine surveillance due to the administrative burden.</p>	Yes	No, but exploration ongoing
Netherlands	<p>When COVID-19 hit the Netherlands in 2020, no state of emergency was declared. The Dutch government used existing laws to deal with the pandemic situation, and it decided to invoke other acts or additional powers as well. The Public Health Act grants special powers to the Minister of Health, Welfare and Sports and to the chairs of security regions. The Minister may instruct a security region chair how to deal with fighting the virus. In the Netherlands, the power to declare a state of emergency is based on The Constitution of the Kingdom of the Netherlands and the Coordination Act. As a general rule, the Dutch cabinet issues a royal decree, on the prime minister's initiative. This mechanism was included before the pandemic hit.</p> <p>COVID-19 is a notifiable disease. Doctors or heads of laboratories in the Netherlands are obliged to notify the Municipal Health Service (GGD) in their region of every positive tested person. The government's strategy for dealing with coronavirus is based on keeping society functioning as normally as possible. The Monitoring and surveillance of COVID-19 will remain in place for the time being.</p>	No	No, but surveillance mechanisms are being kept in place for the foreseeable future



<p>Poland</p>	<p>According to the Polish constitution in situations of special risk, if ordinary constitutional measures are insufficient, an appropriate state of emergency may be introduced: martial law, state of emergency or a state of natural disaster. After the outbreak of a pandemic in Poland, the state of epidemic threat was declared, followed by the state of the epidemic. The legal basis for combating the epidemic was the Act of March 2, 2020 on special solutions related to the prevention, counteraction and combating of COVID-19, other infectious diseases and crisis situations caused by them. Article 25 of the COVID-19 Act introduced many changes to the Act of 5 December 2008 on preventing and combating human infections and infectious diseases.</p> <p>In reference to the assessment of the epidemic situation, legal solutions were used and introduced to prevent and counteract the spread of the virus and combat the disease caused by it. The most important legal acts:</p> <ol style="list-style-type: none"> 1. The Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans (Journal of Laws of 2021, items 2069, 2120) 2. The Act of March 2, 2020 on special solutions related to the prevention, counteracting and combating COVID-19, other infectious diseases and crisis situations caused by them (Journal of Laws of 2021, item 2095, as amended) 3. Act of 19 June 2020 on the solidarity allowance granted to counteract the negative effects of COVID-19 (Journal of Laws of 2020, item 1068, of 2021, item 1162) 4. Act of 19 June 2020 on interest subsidies for bank loans granted to entrepreneurs affected by COVID-19 and on simplified proceedings for approval of an arrangement in connection with the occurrence of COVID-19 (Journal of Laws of 2021, item 1072, 1080, 1535) 5. The Act of 15 July 2020 on the Polish Tourist Voucher (Journal of Laws of 2021, items 839, 2368) 6. The Act of August 14, 2020 amending certain acts to ensure the functioning of health protection in connection with the COVID-19 epidemic and after its cessation (Journal of Laws of 2020, item 1493) 7. The Act of October 7, 2020 amending certain acts to counteract the socio-economic effects of COVID-19 (Journal of Laws of 2020, item 1747) <p>An ICT system has been created (the so-called EWP system), which includes the address and contact information of persons returning to the country from abroad, subject to mandatory quarantine. This system is also used to process the data of other people subject to mandatory quarantine in connection with the epidemic caused by SARS-CoV-2 virus infections, as well as people who are isolated at home, people for whom a decision was made to perform a diagnostic test for SARS-CoV-2, and people infected with the virus. In legal terms, the EWP system is the so-called IT system made available by the unit subordinate to the minister competent for health matters competent in the field of health care information systems² - i.e. by the e-Health Center³, and its functionality and the scope of data collected therein are regulated in § 2 of the Regulation of the Council of Ministers of 9 October 2020 on establishing certain restrictions, orders and bans in connection with the epidemic (Journal of Laws of 2020, item 1758) 4.</p> <p>According to the Regulation of the Minister of Health of April 7, 2020 the National Register of Patients with COVID-19 was created which has the status of a medical register.</p> <p>The entities obliged to report patients in the register are:</p> <ul style="list-style-type: none"> • health care entities providing medical activities such as hospital services, including health care in an isolation room, • medical diagnostic laboratories for the diagnosis of SARS-CoV-2 virus infection <p>It was provided by a regulation of the Minister of Health to extend the operation of the register until December 31, 2022 in view of the still prevailing epidemic. Maintaining the registry will contribute to a better control of potential</p>	<p>Yes</p>	<p>No, but surveillance mechanisms are being kept in place until at least end of 2022</p>
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	<p>outbreaks of infection and will allow for a long-term follow-up of patients after discharge from the intensive care unit or hospital.</p> <p>Government Crisis Management Team In crisis situations, the first decisions are made during the meetings of the Government Crisis Management Team. The work of the team is led by Prime Minister Mateusz Morawiecki. It is also composed of ministers - in this case, inter alia, Minister of Health, Minister of Interior and Administration and Minister of National Defense.</p> <p>Team of the Minister of Health for monitoring and forecasting A specially appointed monitoring and forecasting team operates by the Minister of Health, whose aim is to exchange experiences and compare data from various classes of epidemiological models and approaches to epidemiological forecasting. It is composed of representatives of public institutions (the Ministry of Health, the Chief Sanitary Inspectorate, the National Institute of Public Health, the Central Statistical Institute, the Agency for Health Technology Assessment and Tariff System and the Centre for e-Health) and expert-research teams. The main tasks of the team include collecting demand and sharing data with research teams, preparing weekly short- and medium-term forecasts of epidemic development, as well as preparing variant forecasts. The data processed relate to, inter alia, illnesses, deaths, tests performed, etc. They constitute the basis for decision-making by the Government Crisis Management Team. As a result, the government reacts on an ongoing basis, and the introduced rules and restrictions reflect the current epidemiological situation and various scenarios of its development.</p> <p>Advisory teams in ministries Several smaller COVID-19 teams have also been established within individual ministries. Examples of departmental teams:</p> <ul style="list-style-type: none"> • Team for the implementation of distance education in relation to the prevention, counteraction and combating COVID-19 • Advisory Board for Safety in Education • Team for the coordination of activities in the higher education and science system in relation to the risk of COVID-19 • Team for monitoring cybersecurity of the energy sector in relation to COVID-19 (Ministry of Climate) • The Crisis Management Team of the Minister of Climate and Environment for the COVID-19 epidemic threat • Crisis Management Team at the Ministry of Finance. <p>COVID-19 Council The main tasks of the COVID-19 Council will be to analyze the current health, economic and social situation in the country. The Council will also present proposals for action to combat the pandemic. The main tasks of the COVID-19 Council are:</p> <ul style="list-style-type: none"> • analyzing and assessing the current health, economic and social situation in the country in the field of counteracting and combating the effects of a pandemic; • preparing and presenting proposals for actions to prevent and combat the effects of the COVID-19 pandemic, with particular emphasis on the area of health protection; • issuing opinions on draft legal acts and other government documents with a significant impact on issues related to preventing and combating the effects of the COVID-19 pandemic. <p>Remote health monitoring of high level group patients</p>		
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	<p>Patients with COVID-19 who are at risk can be monitored remotely - including the level of saturation, i.e. arterial blood oxygen saturation, heart rate, temperature and disease symptoms. It is possible, among others thanks to the pulse oximeter and the special PulsoCare app. If the doctor decides to add a patient to the DOM program, the post office will deliver the necessary equipment to the patient's home.</p> <p>The pulse oximeter and application are easy to use, allowing COVID-19 patients to measure themselves. On the other hand, consultants and doctors monitor the results of patient measurements on an ongoing basis and, if necessary, call an ambulance. In alarming situations, the patient is referred for a remote consultation (telemedicine).</p>		
Portugal	<p>There is a state of emergency legislation, several levels are distinguished, and monitoring mechanisms were also already in place. However, many new changes had to be approved due to impact of COVID-19. A commission to collect and provide information to decision-makers was set up and is working on questions of future preparedness as well as publish reflections on lessons learned. Improving links between primary care providers and the hospital system will be one aspect of this ongoing work.</p>	Yes	No, but exploration ongoing
Serbia	<p>Covid monitoring and surveillance system was established based on:</p> <ul style="list-style-type: none"> • Precovid set of legislation: <ol style="list-style-type: none"> 1. THE LAW On the protection of the population of infectious diseases (https://www.paragraf.rs/propisi/zakon_o_zastiti_stanovnistva_od_zaraznih_bolesti.html) 2. Rule book on reporting infectious diseases and special health issues (from 2018) that stated that there has been obligation for registration: any suspicion of the occurrence of a contagious disease that meets the definition of health hazards of international importance, according to the International Health Regulations and the World Health Organization (hereinafter: WHO): https://www.paragraf.rs/propisi/pravilnik-o-prijavljivanju-zaraznih-bolesti-posebnihzdravstvenih-pitanja.html • During pandemic regulations: <ol style="list-style-type: none"> 1. Order on declaring an epidemic of contagious disease CVI/19: 37 / 2020-8 (required by the Rulebook): http://www.pravno-informacioni-sistem.rs/SlGlasnikPortal/eli/rep/sgrs/ministarstva/naredba/2020/37/1/reg 2. Conclusion (Government on the establishment of a single and centralized software solution - Information System COVID-19 (IS COVID-19)): 50 / 2020-9, 57 / 2020-17 (Conclusion (Government on the establishment of a single and centralized software solution - Information System COVID-19 (IS COVID-19)): 50 / 2020-9, 57 / 2020-17) <p>The validity of these legislations is not limited.</p>	Yes	Yes. There is a long term strategy, but depends on the future situation
Slovenia	<ul style="list-style-type: none"> • The 'state-of-emergency' was activated in Slovenia on the 13th of March 2020 with declaration of epidemic in relation to the Communicable Diseases Act and Healthcare Databases Act. After the beginning of the pandemic, a set of 10 legislation acts was enforced to manage the epidemic. • Some of the changes there were made with the emergency legislation acts, can become permanent, but at the moment, no decisions were taken on the maintenance of these organisms and systems dedicated to COVID-19 after the closing of the 'state of emergency'; such issues are still under discussion. 	Yes	No, but exploration ongoing
Spain	<ul style="list-style-type: none"> • The state of emergency was declared in Spain in March 2020, but it was not necessary for set up a surveillance system, as it was already in place since 1995 when the National network for epidemiological surveillance was set up (https://www.isciii.es/QueHacemos/Servicios/VigilanciaSaludPublicaRENAVE/Paginas/default.aspx ; Royal Decree 2210/1995 https://www.boe.es/buscar/doc.php?id=BOE-A-1996-1502) • The surveillance system will continue as from now, maybe with improvements in the process of collecting data (i.e. better automatization of registries) but its existence and objectives will remain the same. 	Yes	Yes (but will partly still depend on future classification of COVID-19)



	Regarding the surveillance of COVID-19 it will depend if it keeps being considered as pandemic as from now or evolves into an endemic disease. This will entail a change in the terms of the information required for its surveillance but not in the mechanism or system lying behind.		
United Kingdom	<ul style="list-style-type: none"> • Yes, emergency legislation put in place to access data without usual requirements called the COVID COPI (Control of Patient Information) regulations which legitimized a range of new data flows, including the flow of primary care data into the NHS Digital datastore in England, and the collection of surveillance systems for infection, viral variants, hospital admissions and vaccination. See https://digital.nhs.uk/coronavirus/coronavirus-covid-19-response-information-governance-hub/control-of-patient-information-copi-notice • Yes, there is a provision for the collection of data to manage the health service – Section 255 of the Health and Social C– Section 255 of the Health and Social Care Act 2012 - https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notice/nhs-wales-directions • The COVID COPI regulations will cease on 30/06/2022. UK Governments are currently considering preparedness for future pandemics beyond that date. 	Yes	No, but exploration ongoing



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