Vaccine European New Integrated Collaboration Effort (VENICE/VENICE II)

Project Aims:
The project aims to collect, share and disseminate knowledge and best practice in the field of vaccination through a network of European experts

Summary of the project

General objectives
VENICE II was committed and partially funded by the European Center for Disease Prevention and Control (ECDC). It started in December 2008 with the general aim of collecting and sharing information on the national vaccination programs through a network of professionals and of contributing to improve the overall performance of immunization systems.

VENICE II collects information on selected vaccination programs at national and sub-national level; the project provides information on the impact of newly introduced vaccinations in Member States and produces evidence, comparable data and recommendations that can be useful for public health stakeholders. Other topics in the vaccination field, such as vaccination coverage data collection and the immunization of underserved population, are explored.

All 29 countries that participated in the previous project are involved in the VENICE II project and the previous results have been incorporated. The working network of experts has been maintained in order to promote and share knowledge and best practices in vaccination among the European states.

Results achieved and expected
During the VENICE (2006-2008) project, 6 reports were produced through web-based surveys to evaluate in the EU/EEA countries:
- general aspects of countries’ immunization programs
- monitoring systems for adverse events following immunisation systems
- methods for vaccination coverage assessment
- computerized immunization registries
- national seasonal influenza vaccination campaigns (2007)
- introduction of HPV and Rotavirus vaccinations, just after the authorization of these two products (2008)
During the VENICE II (2009-2012) project, 17 reports have been produced up to now and 13 of them are available on the VENICE web site (http://venice.cineca.org).

The reports were produced through web-based surveys to evaluate in the EU/EEA countries:

- vaccination strategies for specific diseases: Hepatitis B, tick-born encephalitis, varicella, seasonal influenza (from season 2007/08 to 2010/11), pandemic influenza
- vaccination strategies in adults
- the status of the introduction of HPV and rotavirus vaccination at 2010
- impact of pertussis vaccination and pneumococcal vaccination
- determinants for low measles-mumps-rubella vaccination coverage rates
- methodology of vaccine coverage assessment in Europe
- feasibility of vaccine coverage data collection from Member States at ECDC level

A report on the seasonal influenza survey for 2011-2012 and a technical document on measles-mumps-rubella vaccination in underserved groups will be available by February 2013.

Among these activities, the pandemic flu survey was very relevant. In 2010 the project contributed to the evaluation of the situation by providing reliable information on the strategy adopted in each Member State during the emergency in 2009. The data provided by experts were validated by Health Security Members - Influenza Section. ECDC, EC, WHO agreed to use the VENICE network data as a referenced data source for this important information.

In 2011, ECDC asked the VENICE network to work on a model of vaccine coverage data collection specifically designed for the EU Member States. The first step was to produce a consensus document among the VENICE experts on a theoretical model (European VAccination COverage data Collection system (EVACO)) that in 2012 was piloted in 5 Member States and that has now been extended to more States.

**Measurable outcomes at national and European level**

The project promotes best practices, collecting, analysing and sharing among countries good practice in vaccinology and immunization strategies. Furthermore it is a contribution to the free movement of persons disseminating information on risks of infectious disease transmission due to free movement of persons among the EU states and helping to manage cross border threats.

**Main public health benefits for the target group**

The main Public Health benefits for the target group of the project are the sharing of experiences and expertise, documents and guidelines among countries. This represents a precious resource for all participating countries to improve the overall performance of the immunization systems.

**Impact on Member States’ health policy for further development of public health programmes**

VENICE had a relevant impact in the Union: a collaborative European network of experts working in immunization programs was created; a common interest in sharing experience and expertise on the theme of vaccination was documented;
tools and procedures to facilitate exchanges were designed; relevant information on immunization programs, adverse events surveillance systems, vaccine coverage assessment were collected; the process of the introduction of recently licensed vaccines was monitored.

The results of the project stored on the VENICE website represent a solid source of knowledge and documents from the EU countries to be used in the decision-making process for immunization strategies at national level in Public Health.

**Dissemination of project**
The project results are disseminated through reports published on the VENICE website, ECDC, and scientific journals. The Public electronic versions of reports and publications for VENICE and VENICE II are available on the following link:

- [http://venice.cineca.org/project_outputs.html](http://venice.cineca.org/project_outputs.html)
- [http://venice.cineca.org/publications.html](http://venice.cineca.org/publications.html)

The stakeholders are national immunisation programme managers, policy makers at EU level and in ministries of health, experts working in the vaccination field in general, VENICE network gatekeepers and VENICE contact points.
Administrative details

Main beneficiary:
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Total cost:
- **VENICE I**
  EUR 994,715.40
- **VENICE II (ECDC)**
  EUR 1,299,144.40

EC Contribution:
- **VENICE I**
  EUR 549,755.40
- **VENICE II (ECDC)**
  EUR 1,093,711.10

Duration:
- **VENICE I**
  36 Months
- **VENICE II (ECDC)**
  24 Months renewable

Start date:
- **VENICE I**
  01/2006
- **VENICE II (ECDC)**
  12/2008

End date:
- **VENICE I**
  12/2008
- **VENICE II (ECDC)**
  12/2012

Associated partners

**VENICE I**
- Health Protection Surveillance Centre, Ireland.
- Regione Veneto, Segreteria Sanità Sociale, Italy.
- Institut de Veille sanitaire, Département des maladies infectieuses, France.

**VENICE II**:
- Health Protection Surveillance Centre, Ireland.
- CINECA Inter-University Consortium, Health Care Systems Department, Italy.
- Institut de Veille sanitaire, Département des maladies infectieuses, France.
- Statens Serum Institut, Department of epidemiology, Denmark.
- National Institute of Public Health, National Institute of Hygiene, Poland.