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DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Directorate B - Health systems, medical products and innovation  
B4 – Medical products: quality, safety, innovation

Brussels,  
SANTÉ B4/DF/ARES(2020)

Competent Authorities on Substances of Human Origin Expert Group  
(CASoHO E01718)

## **Meeting of the Competent Authorities for Blood and Blood Components**

**15 October 2020, 9:30-16:30**

**BY TELECONFERENCE**

### **Summary Minutes**

#### **PARTICIPATION**

CAs from 27 Member States (MS) attended the meeting, as well as Norway, Liechtenstein, North Macedonia and Turkey. The meeting was also attended by representatives from the European Centre for Disease Prevention and Control (ECDC), the European Medicines Agency (EMA), the World Health Organization (WHO) and the European Directorate for the Quality of Medicines & HealthCare (EDQM).

The representatives of the European Commission/DG SANTE unit B4 chaired the meeting.

#### **1 WELCOME, INTRODUCTORY REMARKS, ADOPTION OF THE PREVIOUS MINUTES AND OF THE AGENDA**

Sylvain Giraud, Head of Unit B4 in DG Santé, welcomed the authorities to this regular meeting of the expert group. Mr Giraud summarised the key points of the agenda, explaining that issues related to Covid-19, and convalescent plasma in particular, would not be addressed as these had been covered in a dedicated meeting of the group in September.

The draft minutes of the meeting on 3 June 2020 had been circulated in advance and participants were asked to send comments before finalisation and publication.

The agenda of the meeting was adopted without changes. The participants were invited to state any conflicts of interest. None were declared.

## **2 REGULATORY MATTERS – POINTS FOR INFORMATION**

For Directive (EU) 2016/1214, remaining infringement proceedings for non-transcription have been closed and a conformity check was completed at the end of 2019, with some follow-up actions ongoing in one Member State.

Complaints received by the Commission relating to plasma procurement, contract manufacturing and rules regarding eligibility to donate by men having sex with men were mostly closed or in the final stages of closure.

DG Sante had responded to 5 parliamentary questions since the previous meeting: 2 on the need for EU support for CoVID-19 Convalescent Plasma collection, 1 on patient blood management, one on blood supply continuity and one on thalassaemia patient access to blood during the pandemic.

## **3 EMA – PLASMA COLLECTION AND REGULATORY FLEXIBILITY**

EMA presented on discussions with DG Sante and the plasma industry on the introduction of possible elements of regulatory flexibility to ensure that the supply of plasma for medicinal products is maintained during the pandemic and without compromising safety. EMA, together with the Commission and the Heads of Medicines Agencies had published a general [Q&A](#) on regulatory expectations for medicinal product for human use during the Covid-19. For third country plasma collection sites, the use of control measures (other than inspection) could be used for previously inspected sites while distant inspections could be implemented for new collection sites opened by companies that already run previously inspected sites.

EMA was also reviewing donor eligibility rule changes that might facilitate increased plasma collection during the pandemic, in particular the rules regarding plasma donation by men having sex with men. On the latter subject, EMA was planning to publish a statement towards the end of 2020 or early in 2021. Other changes to eligibility criteria such as piercing and tattoos were being discussed with DG Sante.

EMA noted that they were monitoring the plasma supply situation and would update a sector survey later in the month. EDQM reminded the meeting of the common recommendations to increase plasma collection and supply, adopted following a symposium they hosted on this topic. Overall, it was noted that there is broad interest within the public blood services to increase plasma collection, though most of the work is still to start.

## **4 FOLLOW-UP TO THE EVALUATION OF THE BLOOD LEGISLATION**

DG Sante confirmed that work was proceeding on actions to address the gaps and shortcomings identified in the evaluation of the BTC legislation. A legislative proposal was foreseen in the Commission Work Programme for 2021 and would be preceded by an Impact Assessment. It was expected that an Inception Impact Assessment (roadmap) would be published for comment before the end of the year and based on that, an approximate time-frame for the process was presented.

## **5 INSPECTION AND AUTHORISATION**

### **5.1 Update from the Commission Inspections Expert Sub-group**

The Italian authority updated the meeting on the work of the sub-group that had met on 25 June 2020. The 5 work clusters were proceeding with work on their respective topics: Guidance, Training, Joint Inspections, Inspection System Audits and Dissemination. The guidance work cluster was focusing on the development of specific guidance for inspection during the pandemic. Good practices had been gathered to help develop this guidance, addressing both desk-based controls and virtual (video conference) inspections. The work cluster leader encouraged participants to provide feedback on their experiences of remote inspection.

The training cluster had finalised a training plan proposal and shared it with the sub-group for approval. They continued to investigate possible resources for online hosting and collaboration with inspector groups in other, related, sectors. Documents to define procedures for joint inspections had been shared and it was hoped that a programme of joint inspections could be launched in 2021, Covid-19 measures permitting. In discussion, the need for online training platforms was highlighted.

Both Austria and Cyprus had given their availability to be audited in an exploratory exercise with auditors from DG Sante and expert BTC inspectors from other Member States. The first such audit was planned for December 2020.

### **5.2 Update from the GAPP Joint Action**

On the subject of BTC preparation process authorisation, an update was given by the GAPP Joint Action co-ordinators (Italy) and the work-package 7 (microbiological safety as part of preparation process authorisation) leader (Finland). The action is moving towards its final tasks – particularly on ensuring sustainability of the results and organising training on the various deliverables of the project. The consortium had requested an extension from April to October 2021 to allow for an additional piece of work on adapting the Euro-GTP risk assessment tool developed for tissues and cells to be used also for blood and blood components. The chair complimented the authorities participating in the action for the high level of productivity of their work and the consensus they have built. Newsletters describing the action and its outputs to date are available at the link: <https://www.gapp-ja.eu/newsletters/>

Participants were reminded to send their comments on the work-package 7 draft guidance on the assessment of technical aspects that aim to reduce the risk of infectious disease transmission, e.g. donor testing, pathogen reduction, sterilisation steps. The document had been circulated previously.

## **6 VIGILANCE AND SURVEILLANCE**

### **6.0 ECDC update**

ECDC provided a global overview of the progress of the Covid-19 pandemic showing the geographical spread. The presentation also provided information on outbreaks of Ebola,

West Nile Virus, MERS and Dengue during 2020. It was noted that West Nile Virus had been transmitted in the Netherlands for the first time.

### 6.1 RAB alerts overview

DG Sante presented an overview of Rapid Alerts blood launched during Summer 2020. As in other years, the main alerts concerned (seasonal) outbreaks of West Nile Virus.

The Belgian authority commented on a recent alert regarding a defective HIV test kit.

### 6.2 Serious Adverse Reactions and Events (SARE)

EDQM, that analyses SARE data on behalf of DG Sante, presented preliminary data from the SARE 2020 exercise (data 2019), as well as the Final Summary Report of the SARE 2019 exercise (data 2018) that was due for publication [since [published](#)]. Competent authorities were asked to validate their 2019 data and contact EDQM in the event of any error.

### 6.3 Update from the Vigilance Expert Sub-group

An update was provided on the work of the sub-group. They have highlighted the differences between rates of reaction and event reporting between Member States. These differences are thought to be related to different approaches to what is reported rather than real differences in SARE rates. The differences relate largely to the application of the severity and imputability guidance. The group is introducing improvements to the common approach guidance and the reporting template to increase harmonisation of reporting. A new category of 'system failure' has allowed for many events previously attributed to human error to be more correctly classified.

Participants were encouraged to provide feedback to the VES regarding their proposal that all should aim to report donor reactions of imputability grade 3 or more in order to allow comparability. Discussions would continue on whether this cut-off for donor reactions should be lowered in future.

## **7 BLOOD SERVICE RE-ORGANISATIONS**

Hungary presented a project to re-organise and improve the national blood service. The project aims to conduct a comprehensive survey of the current blood establishments. On the basis of the information gathered, it will create an organizational development strategy, elaborate an implementation methodology (unified job-based system, unified job register, competency-based qualification system, training and incentive system related to the above) using the best practices of international blood supply institutions, and to develop an assessment.

## **8 OTHER EU LEGAL FRAMEWORKS**

### 8.1 Pharmaceutical strategy for Europe

DG Sante presented the strategy document that was open for consultation. The strategy has a number of key pillars: to ensure access, to address shortages, to ensure affordability of medicines for patients and health systems sustainability, to enable sustainable need-

driven innovation and to succeed on the global level. Authorities were encouraged to review the strategy and participate in the consultation.

## 8.2 Medical devices

DG Sante informed the meeting that the implementation of the new medical device regulations (2017/745 and 2017/746 on medical devices and in vitro diagnostics) that was due on 5 April 2020 had been postponed for one year due to the pandemic. On the topic of the up-classification of blood bags, general guidance was under development by the Commission but it was unlikely that the up-classification of bags containing medicinal products would change. The alert on a defective HIV antigen test (mentioned under the RAB point above) was reiterated.

## 9 CONTINUITY OF SUPPLY AND EMERGENCY PLANNING

EDQM presented their work on emergency planning, ongoing in the context of the collaborative agreement with the European Commission. EDQM reporting having established the Blood Supply Contingency and Emergency Plan project (B-SCEP Project) to take this work forward. The overall objective is to contribute to strengthening national and EU level plans to ensure continuity of the blood supply during crises.

EDQM had established an expert group (10 experts: technical and scientific expertise representing the maximum number of countries and 2 ad-hoc experts; candidates proposed by the CD-P-TS and DG-SANTE; reviewed by EDQM, the CD-P-TS Bureau and by DG-SANTE). The committee would conduct a survey of current practice and proceed to develop and disseminate recommendations on good practice for emergency/contingency planning. Participants were asked to inform EDQM of the names of any key emergency planning organisations or groups in their Member States that should be consulted during this work.

## 10 OTHER EDQM ACTIVITIES

EDQM reported that a revision of the blood guide had been published in May 2020. The main change concerned the merging of the Principles with the Standards sections. For each topic, the guidance provides principles, followed by the EU legislative requirements and then the standards recommended by EDQM. By quarter 3 of 2020, there had been almost 4,000 downloads of the guidance. An update was also provided on the work of the subgroups on plasma supply management and on risky sexual behaviours impacting safety of donations.

EDQM reminded the meeting that they would hold a virtual conference on October 27-29 2020 on *Keeping up with Reality and Quality: A Challenge for European Blood Establishments*. The conference would celebrate 10 years of collaboration between the European Commission and EDQM in the field of blood and focus on topics such as: MD/IVD Regulations, Changing suppliers Market Place/New Medical Devices, Contingency Planning/Business Continuity, Changing Scope of Practices, COVID-19.

## 11 UPDATE FROM THE EUROPEAN MEDICINES AGENCY

EMA reported that they had been informed of shortages due to the pandemic. They planned to issue an updated survey of plasma master file holders later in October to gather data on the situation.

EMA presented the Regulatory Science Strategy that was published in March and outlined the priorities for EMA up to 2025. The areas of strategic focus would be:

- Availability and accessibility of human and veterinary medicines
- Data analytics, use of new digital tools and digital transformation
- Innovation
- Antimicrobial Resistance
- Supply chain challenges
- Sustainability of the Network and operational excellence

The agency will reorganise its work in line with a new operating model. The presentation focused on the importance of big data in the authorisation of medicines going forward. Participants were informed about a Guideline on Registry Based Studies that was currently open for consultation. The document aims to optimise the use of real world clinical data registries as a source of evidence to support regulatory decision-making. A workshop on this guideline was scheduled for 19 October 2020 and participants at this meeting were encouraged to join.

## **12 WHO UPDATE**

WHO presented their work on the impact of Covid-19 on the blood supply and on the implementation of the [Action Framework for Blood Products 2020-2023](#).

On the pandemic, interim guidance on Maintaining Blood Supply during COVID-19 Pandemic and collection of COVID-19 Convalescent Plasma (CCP) had been published in March and updated in July 2020. A number of webinars were held during the year. The publication by FDA of the Emergency Use Authorisation for CCP had been reviewed but the decision made not to change the WHO interim guidance in place at the time. A mapping of CCP protocols was conducted and, in collaboration with the International Society of Blood Transfusion, these were made available on dedicated ISBT web page.

The activities of the Action Framework would focus on the Development of Norms, Standards and Guidelines and on Technical Assistance (workshops, training, assessment, twinning programmes and country assistance. The first actions, carried out in 2020, were to publish guidelines on development of centres that carry out consolidated blood donation testing and processing; issue of a White Paper on increasing the volume and quality of recovered plasma for fractionation to manufacture plasma-derived medicinal products (PDMPs); a 4-day webinar on strengthening blood systems through effective regulation and two 4-day courses on implementing haemovigilance for Zambia and Burundi. Online events had very high numbers of participants.

During the year the team had published a number of papers including one on the pressing need for regulation in breast milk banking (accepted by the Lancet) and one A WHO

supported tool for risk-based decision making on blood safety interventions (accepted by Transfusion).

### **13 AOB**

There were no AOB items raised.

### **14 FINAL REMARKS**

DG SANTE thanked all the attendees for their active participation in the meeting.