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*Plenary sitting*

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**B9-0265/2020**

14.9.2020

## MOTION FOR A RESOLUTION

to wind up the debate on the statements by the Council and the Commission

pursuant to Rule 132(2) of the Rules of Procedure

on COVID-19: EU coordination of health assessments and risk classification,  
and the consequences for Schengen and the single market  
(2020/2780(RSP))

**Sara Cerdas**

on behalf of the S&D Group

**European Parliament resolution on COVID-19: EU coordination of health assessments and risk classification, and the consequences for Schengen and the single market (2020/2780(RSP))**

*The European Parliament,*

- having regard to Article 3 of the Treaty on European Union (TEU),
- having regard to Article 168 of the Treaty on the Functioning of the European Union (TFEU), as well as to Articles 4, 6, 9, 114, 153, 169 and 191 thereof,
- having regard to the Charter of Fundamental Rights of the European Union, in particular Article 35 thereof,
- having regard to its resolution of 17 April 2020 on EU coordinated action to combat the COVID-19 pandemic and its consequences<sup>1</sup>,
- having regard to its resolution of 10 July 2020 on the EU's public health strategy post-COVID-19<sup>2</sup>,
- having regard to Article 67(2) of the TFEU, which provides that the Union must constitute an area of freedom, security and justice which 'shall ensure the absence of internal border controls for persons',
- having regard to Article 21(1) of the TFEU, which provides that every citizen of the Union must have the right to move and reside freely within the territory of the Member States,
- having regard to the Charter of Fundamental Rights, including Article 45 thereof, which stipulates that every citizen of the Union has the right to move and reside freely within the territory of the Member States,
- having regard to 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)<sup>3</sup>,
- having regard to Directive 2004/38/EC of the European Parliament and of the Council of 29 April 2004 on the right of citizens of the Union and their family members to move and reside freely within the territory of the Member States<sup>4</sup> (the Free Movement Directive), and the principle of non-discrimination enshrined therein,
- having regard to its resolution of 19 June 2020 on the situation in the Schengen area

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<sup>1</sup> Texts adopted, P9\_TA(2020)0054.

<sup>2</sup> Texts adopted, P9\_TA(2020)0205.

<sup>3</sup> OJ L 77, 23.3.2016, p. 1.

<sup>4</sup> OJ L 158, 30.4.2004, p. 77.

following the COVID-19 outbreak<sup>5</sup>,

- having regard to Rule 132(2) of its Rules of Procedure,
- A. whereas the COVID-19 pandemic has moved from an acute to a chronic risk management phase;
- B. whereas the intensity of the spread of the virus differs greatly from one Member State to another and from one region to another within the same country;
- C. whereas no effective vaccine is yet available;
- D. whereas differing approaches to the collection of data relating to COVID-19 across the EU make it difficult to compare data;
- E. whereas the EU response to the COVID-19 pandemic has so far demonstrated a lack of coordination between Member States, and between regions within the Member States, in terms of coordination of public health measures, including restrictions on the free movement of goods and services and the free movement of people within and across borders and the suspension of other rights and laws;
- F. whereas Member States have organised themselves without consultation, each at national level (barrier measures, quarantine and isolation instructions, screening, care, territorialisation), leading to great disparities within the European Union;
- G. whereas many Europeans have systematically been made subject to different rules depending not only on their place of residence, but also on where they have travelled to; whereas this lack of coordination during the summer period led to disorganised controls and measures at borders, as well as within airports, ports and train stations;
- H. whereas the COVID-19 crisis has not only had major health impacts, but also very significant negative consequences on economic, social, scientific, tourist and cultural exchanges;
- I. whereas the provision of healthcare is above all a national competence, but public health is a competence shared between the Member States and the Union;
- J. whereas there is still scope for the European Union to better deliver on public health policy within the existing parameters of the Treaties; whereas public health provisions under the Treaties are still largely underutilised in terms of the commitments they could be used to fulfil; recalls, in this respect, its resolution of 10 July 2020 calling for a European Health Union;
- K. whereas cross-border threats can only be addressed together and thus require cooperation, coordination and solidarity within the Union;
- L. whereas the measures taken by Member States should always respect the fundamental rights of each and every European; whereas these measures should be necessary,

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<sup>5</sup> Texts adopted, P9\_TA(2020)0175.

proportional and temporary; whereas solidarity between Member States is not an option but a Treaty obligation and part of our European values;

- M. whereas the Commission has already taken initial action by adopting several packages of measures, communications and strategies, including the recent proposal for a Council recommendation of 4 September 2020 on a coordinated approach to the restriction of free movement in response to the COVID-19 pandemic (COM(2020)0499);
  - N. whereas the Council should support this recommendation and establish the necessary measures to ensure that the Member States coordinate their decisions and actions in an effort to stop or limit the spread of the virus;
  - O. whereas Parliament, as co-legislator and the only institution directly elected by EU citizens, must be included as an integral and essential part of all discussions on EU coordination to tackle this health crisis;
  - P. whereas the EU must learn the lessons of events since the beginning of the crisis and must urgently create a European Health Union;
1. Strongly emphasises the need for shared and coordinated health management to fight this pandemic effectively;
  2. Points to the importance of reassuring citizens on the consistency of measures taken from one Member State to another, which will help persuade citizens to adhere to these measures;
  3. Recalls that freedom of movement for Union citizens is a fundamental right enshrined in the EU Treaties and the EU Charter of Fundamental Rights;
  4. Underlines that this right can be restricted only for specific and limited reasons of public interest, namely the protection of public health, public policy and public security;
  5. Insists on the fact that those restrictions should be applied in compliance with the general principles of EU law, in particular proportionality and non-discrimination;
  6. Urges the Member States to adopt only necessary, coordinated and proportionate measures when restricting travel, after careful evaluation of their effectiveness to address the public health issue following the same methodology, and the ECDC recommendations, for the collection of health data and using the same criteria to assess and monitor the risk of the pandemic;
  7. Points out that the ECDC continues to highlight disparities in the data collection and data reporting by Member States; deplores that this lack of harmonisation prevents us from having a clear and complete picture of the spread of the virus in Europe and from implementing actions and measures accordingly;
  8. Notes that each Member State has been following the recommendations of its own scientific council without any coordination with the other Member States or the Commission;

9. Calls on the Commission to promote a common, effective and timely methodology for collecting health data and for counting and reporting the number of cases and deaths;
10. Urges the Member States to adopt the same definition for a probable, possible and positive case of COVID-19 and for a death by COVID-19;
11. Acknowledges the importance of cumulative incidence rates in evaluating the spread of the virus, but also insists on the need to assess the situation taking into account other health criteria such as testing rate, positive test rate, hospitalisation rate and intensive care unit occupancy rate;
12. Underlines that those common health criteria will allow the Member States and the Commission to conduct a common analysis of the epidemiological risk at EU level;
13. Considers that the ECDC should be able to evaluate adequately and effectively the risk of the virus spreading and to publish a daily, or at least a weekly, updated map of the risk based on a common colour code, established according to the information collected and provided by the Member States;
14. Calls on the Commission and the Member States to build a strong European epidemiological information system at different NUTS levels - 1, 2 and 3 - and addressed by the ECDC at the EU level; believes that this system should standardise epidemiological and health data in all Member States and should be updated with the latest digital advances in the provision and interpretation of data;
15. Supports the colour code proposed by the Commission in its last proposal for a Council recommendation; considers that the thresholds suggested (green, orange, red and grey) will facilitate movement within the EU and will give citizens more transparent information and ensure better predictability;
16. Strongly welcomes the regional approach suggested by the Commission; considers that the risk mapping of the ECDC should be done at regional level and not only at national level; calls therefore on the Member States to transmit to the ECDC data collected by regional public authorities on a daily basis;
17. Recalls that the ECDC has recommended that the Member States follow minimum baseline measures to avoid the spread of the virus, such as hygiene measures, physical distancing and limiting gatherings, using face masks in specific settings, teleworking arrangements, extensive testing, isolation of cases, quarantine of close contacts and protection of vulnerable populations;
18. Calls on the Member States to follow the ECDC's abovementioned recommendations and to define a common framework of health measures that public authorities in affected areas should adopt in order to halt the spread of the pandemic;
19. Acknowledges that additional measures should be considered and shared by public authorities if the rate of transmission increases, including interventions limiting population movement, reducing the number of contacts per person, avoiding mass gatherings, paying particular attention to high-risk areas, closing of schools or recommending that people 'stay at home';

20. Considers that such a framework would strengthen mutual trust between the Member States and between the affected areas, and avoid restrictive measures in response; calls on the Member States to pay particular attention to the specificities of cross-border regions and to insist on the need to cooperate at local and regional level;
21. Considers that in the event of an active cross-border spreading zone, public authorities should jointly establish health mechanisms for real-time coordination and exchange of information;
22. Stresses that a coordinated application of health measures on both sides of borders appears essential to ensure that they are consistent, effective and supported by the population;
23. Calls for the adoption and the implementation of a common testing strategy in all Member States, especially in cross-border regions;
24. Considers that the Member States should agree on the minimum number of tests to be carried out per day in accordance with the colour of the area affected and taking into account the population size of that area;
25. Underlines that the comparability of test results will allow reciprocal recognition from one country to another;
26. Calls on the Member States to mutually recognise the results of COVID-19 infection tests carried out by certified health bodies in other Member States;
27. Calls on the Member States and the Commission to agree on a common quarantine period based on the latest scientific data and taking into account the assessment of the ECDC;
28. Calls on the Member States to adopt a common protocol for monitoring asymptomatic cases and for measures regarding the isolation of patients who have tested positive for COVID-19, as well as for the isolation of those patients' contacts;
29. Welcomes the use of passenger locator forms; considers that a digital version of the passenger locator information should be used in order to simplify processing, while ensuring equal access to all and guaranteeing the confidentiality of the storage of such data;
30. Underlines that the common methodology and criteria adopted and the maps developed by the ECDC should facilitate a coordinated approach to Member States' own decision-making processes, and ensure that any decisions taken by the Member States are consistent and well-coordinated;
31. Recalls that giving the public clear, timely and comprehensive information is crucial to limiting the impacts of any restrictions to free movement put in place, and to ensure predictability, legal certainty and compliance by citizens;
32. Points out that the COVID-19 crisis has underlined the need to strengthen the single market, in particular by reintegrating supply chains inside the EU without introducing

protectionist measures, and upholding the production of key products such as medicines, pharmaceuticals and medical equipment;

33. Underlines the need to ensure an efficient, resilient and future-proof single market in which essential products for citizens continue to be produced and delivered across the EU and are made available to all citizens;
34. Calls on the Commission to make public procurement simpler, faster and more flexible to procurers, highlighting the importance of the joint procurement of medicines, medical equipment and personal protective equipment in order to ensure their availability in all regions, including rural and peripheral areas;
35. Recalls that the COVID-19 crisis has shown weaknesses in the protection of consumers due to the proliferation of scams and unsafe products, particularly online; stresses the need to address these weaknesses, especially as regards product safety, by reviewing the General Product Safety Directive to bear in mind the impact of emerging technologies, and to ensure that the digital single market is fair and safe for everyone through the upcoming Digital Services Act so that online platforms can take appropriate action against such products; further stresses that a fully functioning digital single market will rely on a combination of consumer digital protection and digitally supported supply chains;
36. Stresses that consumers need to be well informed about their rights and about the options they have when they purchase goods or services, especially in times of crisis; urges the Commission and the Member States to lead the efforts to provide reliable and adequate information in a way that is easily accessible to consumers across the Union;
37. Calls for consumer protection measures to be maintained against the restrictions imposed by certain airlines and tour operators regarding reimbursement requests for trips that have been affected;
38. Underlines that the COVID-19 crisis should not be used as an excuse to postpone, weaken or abolish the implementation of various product and industry standards, including those designed to promote sustainability; emphasises that it should rather be taken as an opportunity to improve the single market in a way that promotes sustainable production and consumption; calls for support to be given to new sustainable business models and for fundamental changes to existing ones, such as the promotion of leasing, renting and sharing systems or of the reuse sector, while safeguarding workers' rights and consumer protection standards, and for a ban on built-in obsolescence practices; recalls that the affordability of the single market has to be ensured, so that the transformation to a sustainable single market is just and leaves no one behind;
39. Reiterates the position it expressed in its resolution of 19 June 2020 on the situation in the Schengen area following the COVID-19 outbreak; calls on the Member States to ensure a swift return to a fully functional Schengen area without restrictions on freedom of movement; calls on the authorities of all Member States to lift any internal border controls reintroduced in the context of COVID-19; condemns the use of discriminatory restrictions on the right of entry by the Hungarian authorities and calls on the Commission to initiate an infringement procedure on this issue as soon as possible;

40. Instructs its President to forward this resolution to the Council and the Commission.