

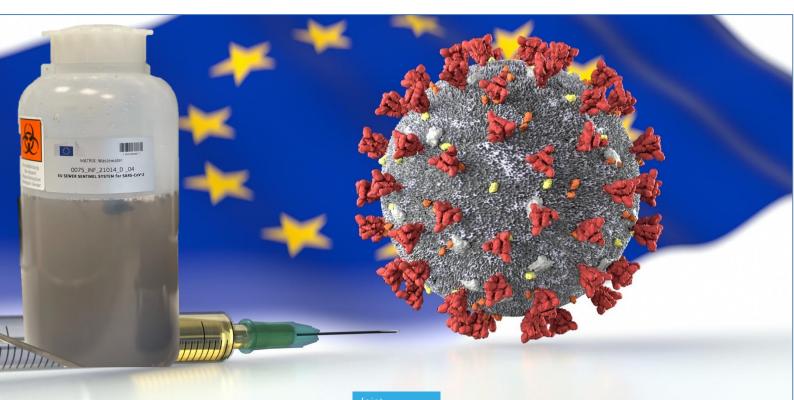
JRC TECHNICAL REPORT

SARS-CoV-2 Surveillance employing Sewage Towards a Sentinel System

Feasibility assessment of an EU approach

Gawlik BM, Tavazzi S, Mariani G, Skejo H, Sponar M, Higgins T, Medema G, Wintgens T

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- [page 13, Figure 4 Screenshot of the COVID19Poops Dashboard run by University of California, Merced]
- [page 13, Figure 5 Overview on the Turkish routine sampling locations operated since July 2020, courtesy of B. Alpaslan Kocamerni].
- [page 17, Figure 9 -24h Sampling Device at the WWTP Aachen Soers, (courtesy of F. Joerens, Wasserverband Eifel-Rur)]

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Foreword

The European Commission's Joint Research Centre (JRC) and the Directorate-General for Environment (DG-ENV) teamed up with the EU Hackathon's winners SEWERS4Covid (the Dutch Water Research Institute KWR, Eurecat – Technology Centre of Catalonia (Spain), University of Thessaly and National Technical University of Athens (Greece), and University of Exeter (UK) and the RWTH Aachen University (Germany)) and, with the assistance of Water Europe and EurEau, launched a call-notice on May 8th, 2020 for participation in an ad-hoc pan-European Feasibility Assessment aiming at exploring the development of a wastewater-based monitoring exercise for SARS-CoV-2 and exchange of experiences in SARS-CoV-2 monitoring in wastewater.

The present report illustrates the resonant scientific community's responses which constituted the bases for the possible creation of an EU-wide Wastewater Monitoring System for SARS-CoV-2 Surveillance. It also contains references and citations of relevant activities at international scale, e.g. with regard to the work conducted by the World Health Organisation (WHO), or the community brought together by the Global Water Research Coalition. Numerous scientists and groups have contributed to this report by sharing findings and insights into work in progress, often even prior to publishing it, thus greatly contributing to an enormous knowledge production, which this report tries to channel to the policy making progress.

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Abstract

Evidence is increasing that untreated wastewater is a good indicator of the presence of the virus in a population. The ability to detect the current SARS-CoV-2 in wastewater is increasingly being reported independently by various research groups as a possible way to better quantify and understand its approximate overall presence in the population. Upon the first confirmation of the virus RNA appearing in stools of COVID-19 patients, research groups in the Netherlands, Australia, United States, France, Italy, Austria and elsewhere have successfully established a relationship between the virus's concentration in influents to wastewater treatment plant and the level of infection in the population in question.

Thus, wastewater surveillance of SARS-CoV-2 eventually combined with the monitoring of suitable tracers such as cross-assembly phage, pepper mild mottle virus or chemicals tracers related to human activities (e.g. food ingredients, inorganic wastewater parameters, pharmaceuticals in particular those used in the treatment of COVID-19, or other contaminants of emerging concern) is a valuable and efficient tool to monitor virus circulation in EU cities and towns.

This report addresses the investigation of the tool in fast track collaborative effort and ad hoc exercise with stakeholders representing Academia as well as the Water and Public Health Sector. The assessment reveals insight in methodologies but also entailed costs for rollout of a European Sewage Sentinel System for SARS-CoV-2. It also shares the findings of two experimental assessment conducted to link existing and ongoing, national, regional or local surveillance programs. It moreover shares the findings of the accompanying knowledge brokering and transfer events organized to have a rolling exchange of information and review of advances, such coping with the speed challenge of the rapid dynamics of this pandemic. One must stress that data from wastewater testing are not meant to replace existing COVID-19 surveillance systems, but are meant to complement them by providing:

- An efficient pooled community sample, since the virus is shed in the faeces of individuals with symptomatic or asymptomatic infection
- information on changes in total COVID-19 infection in the community connected to a sewershed
- Data for communities where timely COVID-19 clinical testing is underutilized or unavailable.
- An early warning for (re)-emergence in Europe and beyond. Sewage testing has been successfully used as a method for early detection of other diseases, such as polio. Indeed, with the right frequency of testing, the tool can become a leading indicator of changes in COVID-19 burden in a community.
- a COVID-19 indicator that is independent of healthcare-seeking behaviours and access to clinical testing.

1. Introduction

1.1. Scope of the activity

Urban wastewater is a direct result of human activities in an urban environment and the occurrence and levels of microbiological, chemical and physical pollutants mirror this. The use of encoded information in treated and untreated wastewater is also the basis for quantitative risk management approaches in the management of the wastewater treatment process and the benchmarking of technologies used in this. The Global Sewage Initiative, the use of sewers for polio monitoring, but also the EU-wide snapshot exercises, the latter being organised by the JRC in support to the Water Acquis proof the systemic viability of this approach.

In the current crisis, evidence is increasing that untreated wastewater is indeed also a good indicator of presence of the SARS-CoV-2 virus in a population. The ability to detect the SARS-CoV-2 in wastewater is increasingly being reported independently by various research groups as a possible way to better quantify and understand its approximate overall presence in the population. Upon the first confirmation of the virus RNA appearing in stools of COVID-19 patients in China, research groups in the Netherlands, Australia, United States, France, Italy, Austria and elsewhere have successfully established a relationship between the virus's concentration in influents to wastewater treatment plant and the level of infection in the population in question. It could also be shown by this approach that the virus appeared in Northern Italy prior to the recognition of an actual pandemic.

From this emerges that wastewater surveillance of SARS-CoV-2 eventually combined with the monitoring of pharmaceuticals used in the treatment of COVID-19 is likely to be a valuable and efficient tool to monitor virus circulation in EU cities and towns and could serve as early warning for re-emergence in Europe and beyond, providing also specific data analytics on the monitoring.

1.2. The science behind the activity

1.2.1. Why is the virus SARS-CoV-2 present in waste waters? How reliable are the results?

COVID-19 (Corona Virus Disease 2019) – is caused by the virus SARS-CoV-2. The virus is present in the stools of persons infected by COVID-19 [1], regardless of whether they show typical symptoms of the disease or not. Also SARS-CoV-2 RNA from urine [2] and respiratory secretions (from hand washing, showering, nasal lavages, tissues, sputum) may contribute to the load of SARS-CoV-2 into the sewer system, as indicated by the detection of SARS-CoV-2 RNA in washbasin and shower siphons [3].

Stools and other viral material (sputum, urine, washing water, etc.) are then transported to waste water treatment facilities, via the local wastewater collecting (sewerage) system. To date, no infectious SARS-CoV2 virus has been recovered from untreated or treated sewage [4] and hence, the virus is understood to be inactive in raw wastewater, although its genetic presence can be detected at the entry of wastewater treatment plants.

Wastewater treatment is known to lessen the signal of the (inactive genetic) virus material, wherefore samples are usually taken at the inlet to the plant. It is typical practice at wastewater treatment plants to take samples of incoming sewage, and the plants are designed so this can be done in a safe and efficient manner [5]. Samples of waste water can also be collected directly from the automated sampling system, for instance at a pumping station, or at a suspected virus 'hotspot' such as a hospital [6] [7], dormitories [8], a residential district or other confined places like cruise ships or passenger aircrafts [9].

Through extensive knowledge sharing internationally, sampling and analysis methods have achieved good level of harmonisation and are considered reliable [10], [11]. They are based on proven methods (PCR) used in medicine for the patient testing (swab tests or blood analyses). Competent laboratories are available in all Member States.

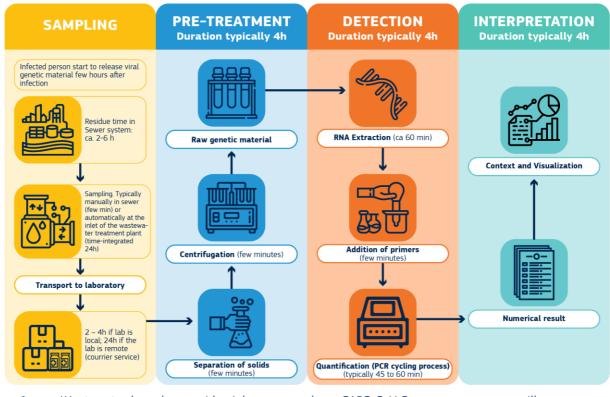


Figure 1- Wastewater-based epidemiology and SARS-CoV-2 sewer surveillance (European Commission 2021 design by I. ARAUJO TAVARES DE MELO)

1.2.2. Is it dangerous for wastewater operators to work in the vicinity of the virus?

Wastewater contains, at any time, a number of pathogens (whether viruses or bacteria), and therefore does pose a certain health risks to all personnel who may come into contact with wastewater. All such work environments should have in place adequate safety procedures in line with the requirements of national authorities and best practice and advice available. Nevertheless, evidence to-date has demonstrated that the major infectious properties are destroyed during the wastewater treatment processes and the exposure to the virus is thus considered to be negligible compared to direct contacts between humans.

1.2.3. Is it possible to detect the virus in wastewaters in anticipation of the pandemic?

Investigations have shown that the virus can be detected within hours in human stool in case of an infection, independent of the patient showing no, mild or strong symptoms of COVID-19. Consequently, the presence of the virus has been detected in some wastewater treatment facilities before the virus was understood to have spread in the population and before medical symptoms were detected by the medical community. The time between the appearance of the virus in untreated wastewater and the appearance of increased numbers of symptomatic patients oscillates between a few days and a few weeks.

This was demonstrated for instance in Amsterdam, Milan or Barcelona. As shown in the table below, in Amsterdam the virus was already detected on the 6th of February 2020, i.e. **3 weeks before the first Dutch case** was reported and 5 weeks before the decision to establish a lock-down [12]. In Barcelona, while the first case was reported on the 25th of February 2020, the virus resulted in samples of wastewater in the area taken on the 25th of January 2020, i.e. **31 days before the first case** was confirmed. In Italy, the first case was reported on February 21, while the virus presence could be seen in wastewater already in December 18th in Milan and Turin and then on the January 29th in Bologna, i.e. **64 and 23 days**, respectively, **before the first cases**.

Table 1 – SARS CoV-2 virus presence confirmation

	Confirmed presence in waste waters	First reported cases	Date of National Lockdown Measures	Days between detection and lockdown	National casualties between first case and lockdown	National casualties x days after lockdown
Amsterdam (NL)	Feb 6, 2020	Feb 27, 2020	Mar 15, 2020	21 days	20	15/04/2020: 3134 (21 days after lockdown)
Barcelona (ES)	Jan 25, 2020	Feb 25, 2020	Mar 14, 2020	31 days	292	14/04/2020: 18276 (31 days after lockdown)
Milan (IT)	Dec, 18, 2019	Feb 21, 2020	Mar 9, 2020	65 days	1809	13/05/2020: 31106 (65 days after lock down)

This early-warning function was confirmed in the meantime: in a first example, the re-appearance of SARS-CoV-2 was anticipated in a research project in A Coruña (Spain), where the virus load started to increase on July 14th, 2020 [13]. In the US successful applications have been reported from Arizona, preventing an outbreak at the university campus[8].

The use of tracking viruses in wastewater is well established and has previously been deployed successfully to monitor, for instance, the polio virus [14] or enteric bacteria [15]. Tracking the virus' presence at regular interval in waste waters could therefore be useful to anticipate a possible pandemic and/or possible new 'waves' of the pandemic.

1.2.4. Is it possible to quantify the presence of the virus in the population on the basis of waste water surveillance?

First results obtained from the JRC / ENV project as well as the information gathered so far show a correlation between the number of persons infected in a catchment area and the quantities of virus found in the waste waters. Results reported in literature (articles cited here) show also that the viral load in the sewage increases, before the number of infected persons increase. Therefore, the number of people infected in an area could in principle be roughly estimated based on quantities of virus found in the wastewaters.

These remain rough estimates to be cross-checked with other sources of information. There are several reason for this: first, the testing strategies of each country differ and provide different numbers in terms of persons infected. Secondly, wastewater does not lie about the presence of the virus, but it is not clear if the virus load stems from residents or from for instance commuting work forces or tourists. Wastewater surveillance is hence most powerful in combination with patient oriented testing.

One obvious lesson of the results gained so far is that if the virus is not present in the wastewaters from an area it means that this area is relatively safe.

1.2.5. How the information provided by wastewater can be used?

Information on the presence of the virus in wastewaters could be used in three main ways:

1. As a preventive or early warning tool – clearly when the virus is detected it should be taken as a signal of a possible (re)emergence of the pandemic;

2. As a management tool – the absence of the virus in wastewater from a particular zone could indicate that the corresponding zone can be considered as of low risk at the time the sample was taken. If the virus is presence is low and stable or in decrease, this could mean that the pandemic is under control and that measures taken are efficient. On the contrary if the quantities of virus genes increase that would mean that additional measures are necessary to stop the further spreading of the virus. This application requires frequent sampling of wastewater, close coordination with health authorities to understand measures in place and the expected time lag between implementing a measure and a change in the progression of the disease. Where the detection

of the virus is carried out in the collecting system (sewerage) of different districts of a city or an area, it could provide additional fine-tuned geographical information.

3. As a safety net – if testing of the resident population is negative, but the virus is detected in wastewater, investigations of other infection sources should be initiated. Such a system, can also help to reestablish public trust in accessing, cruise ships, touristic facilities or other well defined areas with a controlled sewer system.

It is important to stress that this information should always be used as a complement to epidemiologic data when available. In absence of such reliable data, information on presence of the virus in wastewater might be the only reliable indicator of the pandemic extension, and can help for instance in the assistance of situations in less-favoured conditions and countries.

This is confirmed in a recent publication by WHO but also by the French Académie de Médécine identifying that the tracking of the virus can be used for early warning, detection of the virus in areas with limited clinical capacity and monitoring the circulation of the virus for further research. There is a consensus about the cost-effectiveness of this approach. However, the importance of close coordination of laboratories, utilities, and public health authorities to deliver the needs of the public health services, is also stressed.

1.3. Selected examples of application

The **Netherlands** introduced a national programme, commencing September 2020. The Netherlands Ministry of Health announced on June 23rd that **all 352 Dutch WWTPs** were to be sampled **on a daily basis** for the presence of the virus and the data fed into the National Dashboard (decision support tool for pandemic measures) [16]. Other countries, among which Luxembourg [17], France [18] [19], Germany [20], Belgium [21], Italy [22], Spain [23], Portugal [24], Czech Republic [25], Cyprus [26] and Finland [27] have set up national reference studies and seek to mobilize funding for upscaling. Australia [28] introduced a country-wide deployment as of June 10th and also **Turkey [29]** conducted a full country assessment of its major cities. What follows is a more detailed view on the respective situations.

1.3.1. Austria

In **Austria**, Vienna was among the first European cities using the approach and the Region of Tyrol was the first region in the country which introduced a systematic surveillance programme. All 43 WWTPs in the Region covering 99 % of the population are regularly tested ever since [30], [31].

The Austrian Reference Project Coron-A Project [31], [32] was the a logical consequence and funding was provided by the Austrian Federal Ministry of Agriculture, Regions and Tourism, the Federal Ministry of Education, Science and Research, all Federal Countries & the Austrian Association of Cities and Towns. The project is rolling out sewer surveillance in Austria and includes currently 37 wastewater treatment plants.

1.3.2. Belgium

Belgium launched sewer surveillance as of September 2020 coordinated through Sciensano, its Public Health Institute. Research and surveillance projects on wastewater had been initiated in the early months of the epidemic, notably by the Société publique de gestion de l'eau (SPGE) and E-biom, a spin-off of the University of Namur.

The Universities of Antwerp, Leuven and Ghent, the Flemish Environment Agency and Aquafin, in collaboration with the Flemish Agency for Care and Health (Agentschap Zorg en Gezondheid), in Flanders have also conducted such projects.

The Belgium Reference Project covers with 42 wastewater samples, which are analysed twice per week more than 40 % of the Belgium population

The findings of the Belgium case study highlighted some valid observation, which can be extended and generalised:

• Sewer surveillance, if run properly can deliver, as early-warning system, and ensure results less than 12 hours after sample delivery.

- A major public effort would still be significantly cheaper than other tools, a criticism formulated towards the development of tracing apps. It is noteworthy Indeed that most of the findings presented so far resulted from already allocated funds.
- Attention must be paid to focus on delivery and to deviate into scientific research and test optimization.

The DIGICOVID-project [33] develops a multiplex digital PCR method that targets 2 different genomic regions of the SARS-CoV-2 sequence, whereas in the COVIDDIVER project [34], Sciensano develops a method to detect the diversity within these samples.

1.3.3. Cyprus

The International Water Research Center (NIREAS) of the University of Cyprus oversees the progress of sewer surveillance and collaborates with several wastewater treatment plants, e.g. in Limassol. Due to importance of tourism for the country's economy, sewer surveillance offers some important management options.

As a first step, Michael-Kordatou et al. (2020)[26] reviewed the existing technologies and approaches.

1.3.4. Czechia

The Masaryk Water Research Institute conducted from the very beginning investigations on wastewater initially collected samples from 33 wastewater treatment plants of different sizes within the Czech Republic. SARS-CoV-2 RNA was detected in 11.6% of samples and more than 27.3% of WWTPs; in some of them, SARS-CoV-2 was detected repeatedly. The preliminary results indicated that an epidemiology approach that focuses on the determination of SARS-CoV-2 in wastewater could be suitable for SARS-CoV-2 surveillance in the population (Mlejnkova et al. 2020) [25].

1.3.5. Germany

Traditionally, wastewater-based epidemiology in Germany plays a less prominent role than in other countries, and is used in the context of poliomyelitis and enteroviruses surveillance. Westhaus and co-workers investigated the approach in different cities of the Federal State of North Rhine-Westphalia [35]. Agrawal et al. performed similar investigations in the Frankfurt Metropolitan area [36].

Similar investigations are ongoing at the Technical University of Dresden and the Helmholtz Centre for Environmental Research [37]. At present however, there is no specific "reference project" but in order to connect the numerous research activities, carried out by research centres or universities, the German Ministry for Education and Research launched the CORO-Moni Project, acting as umbrella project under the coordination of the German association for water supply, sanitation and waste DWA [31].

1.3.6. Estonian

Researchers of the University of Tartu and the Estonian Health Board are creating an early warning surveillance of SARS-CoV-2 based on waste water analysis [38]. The wastewater samples are collected in all Estonian county centres and towns with more than 10,000 inhabitants. In the collection of samples, the University of Tartu cooperates with the Estonian Environmental Research Centre and water companies operating the water treatment plants of Estonian towns. Waste water samples are analysed for the traces of coronavirus at the laboratories of the University of Tartu, Institute of Technology, that have the required technical capacity and trained staff. Samples are taken weekly from 20 regular and 28 random sampling points across Estonia.

1.3.7. Greece

In 2020, Greece did not have a national project – a rollout was initiated in 2021 - but samples of sewage from the capital Athens are collected analysed daily by the University of Athens to determine the level of viral load and the expected COVID-19 infections in the community. With a capacity of 5.6 Mio population equivalent, the wastewater treatment plant in Athens is designed to serve more than four million people and is one of the largest in Europe. [39].

1.3.8. Spain

Spanish scientists were among the forerunners in employing SARS-CoV-2 sewer surveillance in the current pandemic. Thus, SARS-CoV-2 was detected in Barcelona sewage long before the declaration of the first COVID-

19 case, indicating that the infection was present in the population before the first imported case was reported [40] Shortly, after this Spain initiated a more systematic approach on samples from more than 250 wastewater treatment plants starting with a project in Valencia [41].

The Catalan Region operates a regional reference project. The Catalan Surveillance Network of SARS-CoV-2 in Sewage started in July 2020 to monitor 56 wastewater treatment plants (WWTPs) all over the country representing the sewage from the 80% of the total population. The sampling plan includes in a weekly collection of 24 hours-flow-proportional composite samples from the inflow of each WWTPs [42]. The project includes 56 WWTPs ensuring a coverage of ca. 80% of the country population and 41 of its 42 regions. Data and results can be accessed through an open dashboard [43].

The COVIDBENS-Project was the first project in Europe, which through sewer surveillance anticipated the occurrence of a second-wave event in July/August 2020 in the city of A Coruña [13] and also its current data indicate a re-emergence of the virus (Figure 2).

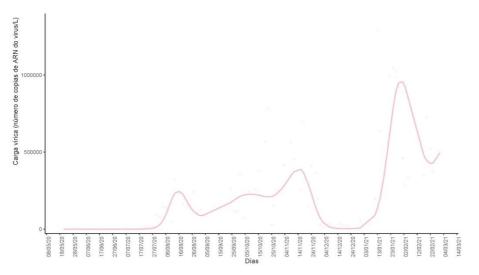


Figure 2 - Tracing of SARS-CoV-2 in A Coruna by the COVIDBENS Project [44].

At National Level, Currently, CEDEX, The Spanish civil engineering research agency (Centro de Estudios y Experimentación de Obras Públicas) oversees the situation and liaises with the European Commission.

1.3.9. Finland

The Finnish Institute for Health and Welfare (THL) coordinates the national and regional responses against COVID-19 using wastewater-based surveillance of SARS-CoV-2. The program relies on previous in-house experiences in poliovirus and illicit drug surveillance programs and covers 28 specific sewerage areas, which serve 60% of the Finnish population. Data are shared through the National Corona Dashboard [45] and the WBE (Wastewater-based Epidemiology) Specific Dashboard at THL [46]. The Health authorities have on-line access to the latest wastewater results, but data are also readily shared with the general public. THL proactively alarms health services if wastewater detection occurs without confirmed cases (early warning) or the viral load in sewage rises faster than the case numbers (acceleration).

Finland also investigated carefully some of the logistical aspects to be considered in the design of the program (Hokajärvi et al., 2020) [47]. Following these experiences, THL together with the University of Tampere and the University of Helsinki launched the WASTPAN Project aiming at a broader use of the wastewater-based surveillances for better preparedness [48].

1.3.10. France

As shown by the French Reference Project RÉSEAU OBEPINE [49], [50], [51], [52], there are strong indications that individual testing may be insufficient particularly in densely populated metropolitan areas [53]. On a long-

term basis, once established, a sewer-based sentinel system could be extremely beneficial in case of epidemics, from influenza to future emerging disease, since the untreated sewer contains valuable information on the general health status of the connected population. The network covers some 150 wastewater treatment plants over 20000 PE across France (including the French over-sea territories).

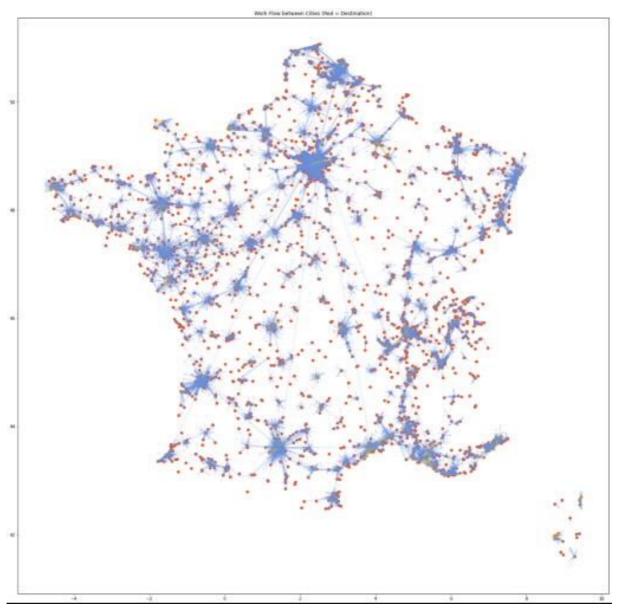


Figure 3 - Visualization of the OBEPINE Network [54]

1.3.11. Italy

The Italian National Institute for Health (ISS) was among the first groups presenting evidence that sewage samples also allow a retro-perspective evaluation, in addition to to reflecting the presence of the virus in the connected community [55]. Comparative assessments conducted for instance in Milan on June 25 and Sept 19, confirmed the beginning of the second wave and leading to 4 times higher shedding of virus RNA into the sewer.

While the Italian National Reference Study SARI encompasses some 50 wastewater-treatment plants, the following locations have been integrated as part of the Sentinel System of the EU Umbrella Study: Milano, Roma, Torino, Crema, Cremona, Livorno and Villapiana (CS). Italy is working on a countrywide roll out of the surveillance.

1.3.12. Latvia

The Latvian Reference Project is run by BIOR (The Latvian Institute for Food Safety, Animal Health and Environment), the Latvian Biomedical Research and Study Centre as well as Riga Technical University. Sampling and detection and covers 5 cities in Latvia.

1.3.13. The Netherlands

In the Netherlands, the National Institute for Public Health and the Environment (RIVM) and the KWR Water Research Institute are conducting research at sewage treatment plants. To that end, RIVM receives samples from all of the over 300 sewage treatment plants (serving 17 million people), on behalf of the Ministry of Health, Welfare and Sports (VWS) and in cooperation with all 21 regional water boards and the Union of Water Boards. This research is a supplement to other research methods to monitor the spread of the coronavirus SARS-CoV-2 in the Netherlands. The RIVM research data is used to provide public information via the Coronavirus Dashboard of the Dutch Government. Since the research methods used by RIVM and KWR differ, the research results produced by RIVM and KWR cannot be combined [56], [57].

Starting in early March, the coronavirus SARS-CoV-2 was found in sewage from Tilburg and Kaatsheuvel. The virus was detected shortly after the first COVID-19 patient was reported in the Netherlands on 27 February. At that time, during the first wave, an increase was observed in the levels of coronavirus in sewage, which corresponded to the increase in hospitalizations. Since mid-February, samples of sewage from Schiphol Airport have also been tested; the samples were taken from sewage produced by passengers, employees and, to a lesser extent, from aircraft [58]. From early March on, the coronavirus SARS-CoV-2 was detected in those samples [12]. From April on, RIVM has been taking weekly samples of sewage from sampling points at 29 sewage treatment plants in the Netherlands. In late July, the number of sewage treatment plants was expanded to 80 sites. From 7 September on, all of the more than 300 sewage treatment plants in the Netherlands are sampled one or more times every week.

The results are shown on the Corona Dashboard provided by the national government [59]. Coronavirus monitoring in sewage takes place in close cooperation with the Union of Water Boards and the regional water boards.

1.3.14. Portugal

The research project COVIDETECT holds the objective of establishing an early warning system for the presence of the SARS-CoV-2 virus, the etiologic agent for COVID-19, through analysis of wastewaters and thus contributing to improving the response towards any eventual outbreaks of this disease [60].

COVIDETECT is a project coordinated by the Ministry for the Environment and Climate Action, which brings together Águas de Portugal – leader of the consortium, Instituto Superior Técnico, Faculty of Sciences of Universidade de Lisboa, Águas do Tejo Atlântico, Directorate-General for Health (DGS), EPAL, Águas do Norte and Simdouro. The project aims to produce a tool for detecting, quantifying, characterizing and modelling the virus through analysis undertaken at wastewater treatment plants.

The Portuguese experience underpinned the viability of the approach but pin-pointed also the aforementioned need for QA/QC Framework, as well as the need to provide a minimum of additional resources to implement and operate a sewer surveillance system. In order to clarify the entailed costs, a cost evaluation should be undertaken more systematically. The need to better engage into a dialogue with health authorities is emerging from all experiences reported.

1.3.15. Sweden

There is no national reference project in Sweden, but scientist at the KTH Royal Institute for Technology developed and tested optimized methods for SARS-CoV-2 detection [61].

1.3.16. Luxembourg

Through the Luxembourg Institute of Science and Technology (LIST), the Luxembourgish authorities systematically survey wastewater in the Grand-Duchy. CORONASTEP provides weekly updates on the 13 wastewater treatment plants forming the network [62]. The weekly or even bi-weekly results of the analyses of the presence of coronavirus in wastewater are first communicated to the Government and published on this

page within 24 to 48 hours. The conclusions of these analyses are also included in a global report of the actors in the fight against the pandemic and published every Wednesday on the Ministry of Health website

1.3.17. Slovenia

Through its National Institute for Biology, Slovenia initiated wastewater surveillance in March, 2020, starting with the investigation at five wastewater treatment plants. In September they began pilot monitoring in seven wastewater treatment plants and found that the upward trend was already visible in early October. It turned out to be a tool that could predict the next wave of the epidemic [63] The surveillance network covers currently WWTPs in Ljubljana, Domžale-Kamnik, Kranj, Koper, Rogaška Slatina, Velenje-Šoštanj, Celje and Maribor, which together cover more than half a million people in Slovenia.

A similar study reports the first detection of SARS-CoV-2 RNA in untreated hospital wastewater in Slovenia [64]. The results show that WBE is a potential tool that could be used as an early warning for COVID-19 and could be applied in municipal wastewater treatment plants as a potential complementary tool for public health monitoring at population level

1.3.18. Slovakia

Slovakia does not yet operate a full reference project. However, the National Water Research institute (WRI) Bratislava – National Water Reference Laboratory, Department of Hydrobiology and Microbiology assessed over 15 weeks (as from17.8.2020) 49 WWTP for total of 102 samples (24 h composite, grab) of which 10 samples gave positive results in accordance with epidemiological data.

So far, the country has no national surveillance programme based on wastewater, mainly due to a systematic and repeated assessment of the entire population by swab testing.

1.3.19. Non-EU experiences

By the time of drafting this report, many countries have rollout wastewater-based survey or operate at least exploratory investigations. A good overview can be obtained through the COVID19Poops Project run by the University of California, Merced, which currently have registered such activities in 50 countries across the world [65].

The Global Water Research Coalition (GWRC) animates a targeted working group, thus facilitating the exchange of information and stimulating active collaborations and exchange of best practices. GWRC has also produced a useful factsheet on SARS-CoV-2 with regard to water, sanitation and wastewater management [66].



Figure 4 - Screenshot of the COVID19Poops Dashboard run by UCM

1.3.19.1. Turkey

The Turkish experience can be seen as one of the major rollouts in the Macro-Region. It also shows the benefits of international exchange and collaboration across traditional geographical and disciplinary borders. The National Reference Project is coordinated by the Turkish Water Institute SUEN and the Ministry for Forestry and Agriculture. After an initial assessment of 81 cities, a permanent network with regular monitoring on 22 wastewater treatment plants including the Mega-City Istanbul [67] was initiated.



Figure 5 – Overview on the Turkish routine sampling locations operated since July 2020 (courtesy of B. Alpaslan Kocamemi from her presentation at the 3rd Town Hall Meeting)

1.3.19.2. Australia

From an international perspective, the Australian approach shown in the ColoSSoS Project, is of lighthouse character. WaterRA is leading this innovative, and collaborative Australia-wide investigation that aims to integrate reliable results of sewage testing for the SARS-CoV-2 virus with health data for COVID-19 on a national basis [28]. Since June 10th, indeed, Australia has integrated sewer surveillance for SARS-CoV-2 into its national response actions, thus complimenting the information obtained by swab tests, molecular epidemiology and serology. The country also explores application of the approach in more confined spaces such as cruise ships and aircrafts.

1.3.19.3. The US approach

Through its Centers for Disease Control and Prevention (CDC) and the US Department of Health and Human Services (HHS), in collaboration with agencies throughout the federal government, the National Wastewater Surveillance System (NWSS) was initiated in response to the COVID-19 pandemic. The data generated by NWSS will help public health officials to better understand the extent of COVID-19 infections in communities. Center for Disease Control and Prevention, the US Federal Government has launched a National Wastewater Surveillance System (NWSS) [68]. CDC is currently developing a portal for state, tribal, local, and territorial health departments to submit wastewater testing data into a national database for use in summarizing and interpreting data for public health action.

As an example at state level, Utah is following the approach of a Sewage Sentinel tool, too and provided a first insight into costs entailed by developing and deploying such a system, reaching prices in the range of 220-550 USD per sample. Prices are mainly depending on distance from the sampling point to the testing lab. This results into cost per inhabitant ranging from 0.005 USD per person in an urban settlement to 0.10 USD per person in a rural situation, clearly underpinning also the economic viability of the approach.

1.4. From Wastewater-based-epidemiology to an EU Umbrella Initiative

With rapid development of the pandemic in the EU as from February 2020, the Europeans found themselves in an unprecedented crisis and precautionary border controls threatened also water supply and sanitation, e.g. by the disruption of supply chains for critical materials such as coagulants or other chemicals used, e.g. for disinfection [69]. Likewise, with the reports of detection of genetic material of the virus in human stool, urine and sputum, and considering the, at that time, existing knowledge on risks related to corona-viruses, e.g. in the reuse of treated wastewater, it became quickly vital to investigate whether wastewater was a potential vector to spread SARS-CoV-2. This led to an almost synchronized mobilization across European water services and researchers addressing the topics. While the worst-case scenario, i.e. wastewater as vector for COVID-19, was quickly eliminated, wastewater-based epidemiology experienced an unforeseen and rapid renaissance. Wastewater based epidemiology as a public health surveillance tool has already earlier been applied to a wide range of waterborne, foodborne and faecal-oral viruses before, but this constellation was new, in a sense that operative contacts between the water sector and the public sector merely existed. In a joint effort, the European Commission reacted on the initiatives taken by individual scientists at the RWTH Aachen University and KWR in Nieuwegein and created an adhoc partnership with representatives of the European Water Sector (EUREAU, Water Europa, Aqua Publica Europea, SUEZ and others) as well as representatives from the Government of Spain, Regional Research Centres and Universities as well as the involvement of the World Health Organisation as well as UNEP, the latter under the remits of the World Water Quality Alliance. Supported also by the Global Water Research Coalition as well as in closely following the experiences gained in Australia, an EU Umbrella Initiative was created with the following three objectives:

- Address the feasibility and viability of a European Sewage Sentinel System for SARS-CoV-2 through a collaborative assessment and experimental exercise (Pillar I)
- Create a platform for knowledge exchange, identification of best practices and sharing of experiences engaging with all actors (Pillar II)
- Address data visualization and requirements for decision support. (Pillar III)

Many ideas of the winning consortium of the EU Hackathon SEWERS4Covid were taken up, too [70].

2. Experimental Feasibility Assessment of a Sewage Sentinel System

2.1. The EU Umbrella Study

This pan-European Umbrella Study was intended as a first opportunity to reliably survey the presence of the SARS CoV-2 virus in the population in a better and more harmonized way, complementing direct testing of individual persons. It aimed at understanding the limitations and challenges of the proposed Sentinel System approach, including the development of a roadmap for a systemic rollout of ongoing national and regional surveillances in a unique approach.

For this purpose, on May 08, 2020 a Call notice on *"Feasibility assessment for an EU-wide Wastewater Monitoring System for SARS-CoV-2 Surveillance"* was published in the Science Hub of the European Commission's science and knowledge service and in the main social media [71].

The ability to detect the current SARS-CoV-2 in wastewater by various research groups and the possible use of wastewater surveillance as a way to better quantify and understand the virus approximate overall presence in the population was clearly highlighted in the Call's text. The call also announced the execution of spontaneous snapshot exercise for sewage monitoring, employing a previously used EU-wide monitoring mechanism. A selected number of wastewater treatment plants in Europe was planned to be enrolled.

The design chosen followed as series of similar activities of the Commission's Joint Research Centre applied in other occasions to gain an EU-wide snapshot using a non-probabilistic approach [72], [73]. Similar to the operations in proficiency testing (PT) schemes or certification exercises, the logistics of these campaigns follow a mechanism of centralized dispatch, involving the shipment of samples to analytical facilities in a way that the transportation and storage does not affect sample stability and hence the coherence of retrieved datasets.

2.2. Selection and identification of sites

The campaign was organized into two consecutive runs of sampling. The first round of sampling was performed during summer 2020, thanks to the participation and to the spontaneous candidacies of more than fifty WWTPs. The exercise was then repeated in September 2020, using the same logistic and sampling approach, but synchronizing samples collection in one single week at all the contributing sampling stations.

WWTPs with information about the infection levels in the connected catchment areas were preferred in the participants' selection.

While WWTPs' enrolment in Round I was achieved by contacting national key persons indicated by the ad-hoc group's network of contacts and by accommodating spontaneous candidacies, the participants' selection for Round II focused on the positive detections from the previous collection and was enlarged to several major cities.

A total of 16 Countries, (i.e.: AT, BE, BG, CY, DE, EE, ES, FI, HR, IE, IT, LV; MT, NL, PL, SE) participated to the first round of sampling, providing a total of 52 24h composite inlet samples. A total of 25 Countries (i.e.: AT, BE, BG, CY, CZ, DE, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, MT, NL, PL, PT, RO SE, SK, SL plus UK and Bosnia Herzegovina) participated to the second round of sampling, thus providing 63 24h composite inlet samples. More than 100 samples were totally collected and delivered to KWR for the analysis of SARS-CoV-2 gene presence.

Figure 6 illustrates the continental geographical coverage of the study and Figure 7 details individual country participation.

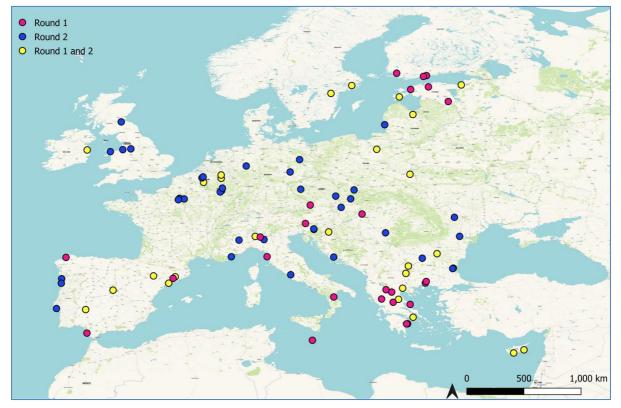


Figure 6 Geographical coverage of the study. (Dots in RED indicate sites participating only in Round I, BLUE only those participating in ROUND II and YELLOW those site which were assessed in both runs)

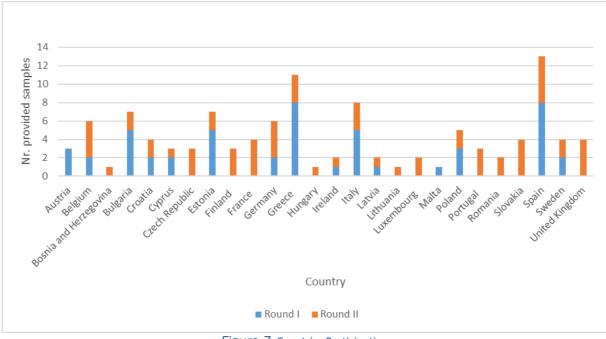


Figure 7: Countries Participation

2.3. Preparation and shipments

The JRC provided all enrolled participants with a complete set of sampling material and with instruction for sampling, including recommendation on Occupational Health and Safety, and a Data Policy document. (see Annexes 2 and 3). Some impressions illustrating the preparation phase of sampling material executed at the JRC facilities, some sampling operations as well as the centralized testing at KWR are shown below.



Figure 8 -Impression from the dispatching operations to the wastewater treatment plants, where automated samplers were used for 24h sampling.



Figure 9 -Automated Sampling Device at the WWTP Aachen Soers (courtesy of F. Joerens, Wasserverband Eifel-Rur)

2.4. Centralised analyses

Sewage surveillance relies on the collection and quantification of the SARS-CoV-2 RNA concentration in wastewater. In order to allow the collection of meaningful information, sample transport, storage and preservation conditions are relevant aspects and they need to be kept under strict control. Furthermore, concentration procedure and quantification method together with contextual information about the amount of human faecal input in the sample are essential for a careful tuning of the activity. With the aim to minimize any possible samples preparation and analytical determinations' inconsistency, a centralized approach was

implemented by selecting the Dutch Water Research Institute (KWR, Nieuwegein, The Netherlands) for both sample extraction and analysis. The JRC organized the transports logistic of collected WWTP influent samples to KWR facilities, ensuring the delivery within 24-36 hours from time of sampling under controlled temperature conditions. (e.g.: +5°C).



Figure 10 -Impression from the from KWR Laboratory processing the sampling using RT-PCR

The method that was applied has been described extensively by Medema *et al.* (2020) [74]. It was slightly adopted as described below.

2.4.1. SARS-CoV-2 Detection and Quantification

2.4.1.1. Sample processing

Larger particles (debris, bacteria) were removed from the samples by pelleting using centrifugation of the sample in 50 conical centrifuge tubes at 4654xg for 30 mins without brake. A volume of approx. 50 ml supernatant was filtered through Centricon[®] Plus-70 centrifugal ultrafilters with a cut-off of 100 kDa (Millipore, Amsterdam, The Netherlands) by centrifugation at 1500xg for 15 minutes. The Centricon concentrate of approximately 1 g was pipetted from the ultrafilter holder.

2.4.1.2. RNA extraction

Ultrafilter concentrates were processed using the RNeasy PowerMicrobiome Kit (Qiagen, Hilden, Germany) according to the manufacturers protocol, using the magnetic extraction reagents of the Biomerieux Nuclisens kit (Biomerieux, Amersfoort, the Netherlands) in combination with the semi-automated KingFisher mL (Thermo Scientific, Bleiswijk, The Netherlands) purification system to extract RNA from Centricon concentrates. Elution of RNA was done in 100 µl elution buffer. RNA from the coronavirus Mouse Hepatitis Virus (MHV) A59 was added to each concentrate and co-isolated during the extraction procedure to monitor the possible presence of RT-PCR inhibitors and measure the recovery efficiency of the extraction procedure.

2.4.1.3. Real-time RT-PCR

Primers/probe sets that were published by US CDC3 and a European study [75] were used in this study. Two primer/probe sets were selected: the N2 set from CDC that each target a different region of the nucleocapsid (N) gene and the set targeting the envelope protein (E) gene from [75], to include targets against two separate SARS-CoV-2 genes. The specificity of these primer/probe sets against other (respiratory) viruses, including human coronaviruses, had been confirmed by others. [75] as well as [76].

Technical duplicates of each PCR were run. Each individual reaction contained:

- 5 μl of the total volume of 100 μl eluted RNA template (meaning that 5% of each sewage sample is analysed with each qRT-PCR),
- 4 μl of 5x Taqman Fast Virus 1-Step Master Mix (Applied Biosystems, Fisher Scientific, Landsmeer, The Netherlands),
- different concentrations of primers and probes
- 2 µl of 4 mg/ml BSA (Bovine Serum Albumin, Roche Diagnostics, Almere, The Netherlands)
- the reaction volume was adjusted to a final volume of 20 µl with ultrapure DNAse/RNAse free distilled water (Invitrogen, Fisher Scientific, Landsmeer, The Netherlands).

Thermal cycling reactions were carried out at 50 °C for 5 minutes, followed by 45 cycles of 95 °C for 10 and 60 °C for 30 seconds on a CFX96 Touch Real-Time PCR Detection System (Bio-Rad Laboratories, Veenendaal, The Netherlands).

RT-qPCR reactions on serial dilutions containing RT-ddPCR calibrated EURM-019 single stranded RNA reference material provided by the EC Joint Research Centre [77] were used to construct calibration curves. These calibration curves were subsequently used to quantify N2 and E amplicons in RNA extracted from the sewage samples. Reactions were considered positive if the cycle threshold was below 40 cycles. The recovery efficiency of MHV-A59 RNA was determined by performing RT-qPCR reactions on RNA isolated from sewage samples using a previously described MHV-A59 specific RT-qPCR targeting the N-gen using the procedure described by Raaben et al, 2007 [78]. The recovery efficiency was determined by comparing the MHV-A59 RNA concentration in the sewage sample with the concentration in the spiked MHV-A59 suspension.

2.4.1.4. Virus concentration control

In a subset of 16 samples, the concentration of F-specific RNA phages was measured by the Double Agar Layer plaque assay method according to ISO 10705, before and after the centrifugation and ultrafiltration step, to determine the virus recovery of these steps.

Assay	Target gene	Primer/Probe	Concentration	Sequence ^a	Reference
N2	Nucleocapsid (N)	2019-nCoV_N2- F	200 nM	5'-TTACAAACATTGGCCGCAAA-3'	[76]
		2019-nCoV_N2- R	200 nM	5'-GCGCGACATTCCGAAGAA-3'	[76]
		2019-nCoV_N2- P	200 nM	5'-FAM- ACAATTTGCCCCCAGCGCTTCAG- ZEN/Iowa Black-3'	[76]
E	Envelope (E)	E_Sarbeco_F	400 nM	5'- ACAGGTACGTTAATAGTTAATAGCGT- 3'	[75]
		E_Sarbeco_R	400 nM	5'-ATATTGCAGCAGTACGCACACA-3'	[75]
		E_Sarbeco_P1	200 nM	5'-FAM- ACACTAGCCATCCTTACTGCGCTTCG- ZEN/Iowa Black-3'	[75]

Table 2 - Primers and probes used for the N2 and E gene assay

^a Y=C/T. FAM: 6-carboxyfluorescein; ZEN/Iowa Black: internal ZEN and Iowa Black double-quenched probe

2.5. Results and discussion of the experimental assessment

2.5.1. Overall viability of the approach

The centralized dispatch operation across borders and involving a significant number of actors allowed smooth shipment operations while maintaining the cooling chain. With few exception samples were delivered within 48h after pick-up by the courier service. On opening, sample containers were intact and no loss due to leaking containers were reported.

Shipments to Bulgaria experienced some difficulties in the cross-border control and 1 package was lost because of this. The total expenditure for shipment per package amounted to less than $500 \in$ per shipment including material for packaging and cooling as well as for safety precautions. This correlates with prices reported by other projects.

2.5.2. Detection and quantification of the virus

Data were reported as analytical certificate to the water utilities. Annex 5 and 6 show the single findings. For reasons of property rights sample locations are blackened out. In total of the 124 samples texted 97 resulted positive with measurable concentration for the N2 gene against 27 "non-detects". In all but one case, the observed findings coincided with the other data reported to local health authorities.

In the case of the town at the Polish-Ukrainian border, a clear mismatch was observed. This was also the sampling location with the highest counts in both runs. Information available from local health authorities, e.g. number of hospitalized patients could not explain the high concentration. It is presumed that cross-border commutation of local work force is the primary reason. However, the hypothesis could not be verified in the course of the experiments conducted.

It has to be stressed that the scope of the exercise was to investigate the logistical viability of the approach and not to obtain statistically significant information in the virus-spread in the population itself. The exercise did allow though to connect running local activities (see also 2.5.2.4).

Anonymous code Round 1	N2 Gene copies per inhabitant per day
Austria 1-1	(nd)*
Austria 2-1	(1.4)*
Austria 3-1	(2.9)*
Belgium 1-1	nd
Belgium 2-1	6.0E+06
Belgium 3-1	1.5E+08
Belgium 4-1	2.3E+07
Bulgaria 1-1	2.0E+08
Bulgaria 2-1	2.8E+08
Bulgaria 3–1	4.0E+07
Bulgaria 4-1	5.6E+07
Bulgaria 5-1	4.5E+07
Bulgaria 6-1	na
Croatia 1-1	4.9E+07
Croatia 2-1	5.9E+07
Cyprus 1-1	nd
Cyprus 2-1	nd
Estonia 1-1	nd
Estonia 2-1	nd
Estonia 3-1	3.7E+05
Estonia 4-1	4.9E+07
Estonia 5-1	nd
Germany 1-1	6.9E+06
Germany 2*-1	3.3E+06

Table 3 - Anonymized findings of Round I (Ending -1) 1

Anonymous code Round 1	N2 Gene copies per inhabitant per day
Greece 1-1	7.2E+06
Greece 2-1	nd
Greece 3-1	nd
Greece 4-1	nd
Greece 5-1	nd
Greece 6-1	2.0E+07
Greece 7-1	nd
Greece 8-1	nd
Ireland 1-1	1.8E+06
Italy 1-1	nd
Italy 2-1	nd
Italy 3-1	nd
Italy 4-1	3.6E+06
Italy 5-1	nd
Latvia 1-1	nd
Malta 1-1	nd
Netherlands 1-1	5.2E+06
Netherlands 2-1	2.5E+07
Netherlands 3-1	6.2E+06
Poland 1-1	1.3E+09
Poland 2-1	nd
Poland 3-1	3.3E+06
Spain 1-1	nd
Spain 2-1	nd
Spain 3-1	nd
Spain 4-1	nd
Spain 5-1	1.2E+07
Spain 6-1	3.8E+06
Spain 7-1	4.7E+07
Spain 8-1	2.0E+06
Sweden 1-1	1.4E+08
Sweden 2-1	1.1E+09

*: data in parenthesis are reported as N2 gene copies/ml, since data for normalisation (Inlet Load (m³) and/or the Entering load (P.E.)) were not provided by the plant.

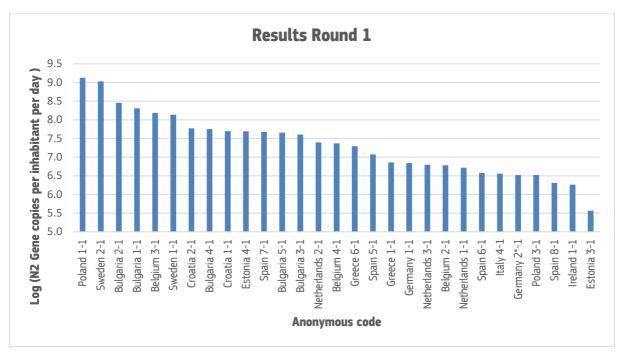


Figure 11 - Overview on positive detects (Round 1) normalized by entering load of WWTP and number of inhabitant equivalents. Data are logarithmic.

Table 4 - Anonymized findings of Round II (Ending -2)

Anonymous code Round 2	N2 Gene copies per inhabitant per day
Belgium 3-2	1.8E+08
Belgium 4-4	1.1E+08
Belgium 2-2	1.5E+07
Belgium 1-2	4.8E+06
Bosnia and Herzegovina 1-2	(9)*
Bulgaria 1-2	1.9E+08
Bulgaria 5-2	6.2E+07
Croatia 3-2	1.9E+08
Croatia 1-2	2.8E+07
Cyprus 1-2	2.8E+06
Cyprus 2-2	nd
Czech Republic 1-2	3.9E+06
Czech Republic 2-2	2.4E+08
Czech Republic 3-2	9.9E+07
Estonia 3-2	nd
Estonia 4-2	1.4E+07
Finland 1-2	6.8E+06
Finland 2-2	1.2E+07
Finland 3-2	nd
France 1-2	3.3E+08
France 2-2	7.1E+07

Anonymous code Round 2	N2 Gene copies per inhabitant per day
France 3-2	8.7E+07
France 4-2	4.7E+07
Germany 1-2	3.7E+07
Germany 2-2	1.1E+08
Germany 3-2	4.1E+06
Germany 4-2	#DIV/0!
Germany 5-2	1.5E+07
Greece 1-2	4.4E+07
Greece 6-2	3.7E+06
Greece 8-2	2.2E+06
Hungary 1-2	8.2E+07
Ireland 1-2	4.7E+07
Italy 4-2	1.3E+07
Italy 6-2	3.8E+07
Italy 7-2	5.6E+06
Latvia 1-2	nd
Lithuania 1-2	1.6E+06
Luxembourg 1-2	1.5E+07
Luxembourg 2-2	2.0E+07
Luxembourg 3-2	5.5E+06
Luxembourg 4-2	2.1E+07
Netherlands 1-2	8.5E+07
Netherlands 2-2	1.4E+08
Netherlands 3-2	8.8E+07
Poland 1-2	2.8E+07
Poland 3-2	1.4E+07
Portugal 1-2	nd
Portugal 2-2	2.6E+08
Portugal 3-2	2.3E+07
Romania 1-2	2.2E+06
Romania 2-2	9.5E+07
Romania 3-2	1.1E+08
Slovakia 1-2	2.1E+07
Slovakia 2-2	0.0E+00
Slovenia 1-2	4.1E+07
Slovenia 2-2	3.2E+07
Spain	7.3E+06
Spain 5-2	2.1E+08
Spain 6-2	7.5E+07
Spain 7-2	3.9E+08
Spain 8-2	2.0E+07
Sweden 2-2	5.7E+07
Sweden 1-2	3.9E+07

Anonymous code Round 2	N2 Gene copies per inhabitant per day
UK 1-2	0.0E+00
UK 2-2	3.0E+07
UK 3-2	1.1E+08
UK 4-2	1.1E+08

*: data in parenthesis are reported as N2 gene copies/ml, since data for normalisation (Inlet Load (m³) and/or the Entering load (P.E.)) were not provided by the plant.

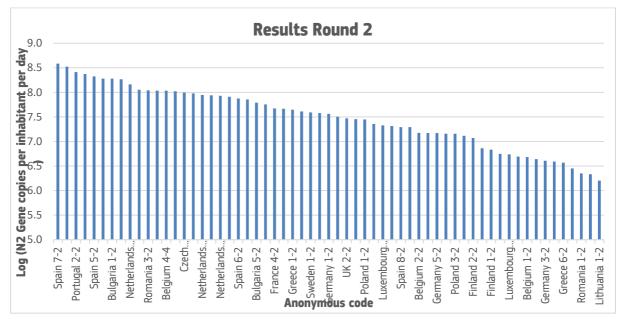


Figure 12 - Overview on positive detects (Round 2) normalized by entering load of WWTP and number of inhabitant equivalents. Data are logarithmic.

2.5.2.1. Findings of Round I

In the first round 56 sampling locations where investigated, of which 29 resulted with a quantifiable viral load for the N2 gene against 22 positive results for the E_Sarbeco gene, pointing towards an already known greater sensitivity of the method if the N2 gene is used for quantification.

Maximum value observed was 946 N2 gene copies per mL corresponding to a Ct value of 40. Median was 8.6 N2 gene copies per ml (Ct = 36)

2.5.2.2. Findings of Round II

In the round II, data from 68 sampling locations resulted in a larger portion of positive detects, i.e. 61 and on 7 non-detects, with a maximum N2-Gene concentration of 175 N2 gene copies per mL (Ct = 39). The Median was 18 N2 gene copies per mL (Ct=34.2)

In Round II, normalization of values was done by CrAssphage concentration thus correcting for meteorological influences.

				Recovery (%)		N2 gene con	centration	Volume WW past 24h	Population	Capacity	
Sampling date	Country	Sampling site	Processe d volume (ml)	AVG	STD %	AVG Gene copies per ml	STD Gene copies per ml	m3	PE (EU 2016)	PE (EU 2016)	N2 GC per inhabitant per day
27/05/20	Spain	Spain 6-1	51.5	46.6%	2.6	2.3	na	22756	81228	196167	6.5E+05
27/05/20	Spain	Spain 4-1	49.3	49.6%	1.8	nd	nd	35131	65749	285666	na
25/05/20	Spain	Spain 5-1	52.4	32.6%	4.3	10.4	0.7	67330	594.266		1.2E+06
27/05/20	Belgium	Belgium 1-1	49.2	59.3%	2.9	nd	nd	58830	218056	401850	na!
26/05/20	Latvia	Latvia 1-1	49.0	57.1%	0.6	nd	nd	8755	81618	77036	na
26/05/20	Sweden	Sweden 2-1	47.7	35.2%	0.8	346.0	1.0	101952	1034261	1000000	3.4E+07
26/05/20	Malta	Malta 1-1	55.0	40.2%	4.4	nd	nd	43317	591967	500000	na
28/05/20	Greece	Greece 8-1	48.3	54.4%	2.3	nd	nd	176630	917000	1333000	na!
26/05/20	Germany	Germany 1-1	49.6	25.8%	0.0	4.5	2.0	59411	437072	458000	6.2E+05
26/05/20	Germany	Germany 2-1	48.0	37.7%	0.6	1.9	1.0	7780	53907	52000	2.8E+05
08/05/20	Italy	Italy 3-1	49.4	45.2%	4.4	nd	nd	30847	207760	239000	na
27/05/20	Greece	Greece 7-1	47.9	56.0%	0.9	nd	nd	1800	14500	26000	na
01/06/20	Belgium	Belgium 5-1	54.0	42.8%	3.6	43.4	1.6	20024	56700	58500	1.5E+07
01/06/20	Belgium	Belgium 6-1	54.3	57.4%	2.6	4.7	2,0	18616	37500	40500	2.3E+06
02/06/20	Belgium	Belgium 2-1	49.1	25.5%	3.0	4.6	3,0	15536	103583	200000	6.9E+05

Table 5 - Data normalization by CrAssphage concentration

nd: not detected; na: not vailable

First is the round 2 sewer data (N2/Crassphage) against the 14d prevalence in the region of the city, as reported by ECDC. The region and the city are not identical, but generally the city is an important part of the region for which the prevalence data are reported. So not a perfect match, but an indicator whether the sewer signal is higher in regions where the virus is more prevalent. It is also not perfect because the testing strategies and availability for human testing differ per country.

Second is a first attempt to do flow and population normalization, using the flow data on the sampling day (reported by the utilities) and the population connected. But very incomplete as it takes some puzzling to get all the population and flow data extracted from the databases.

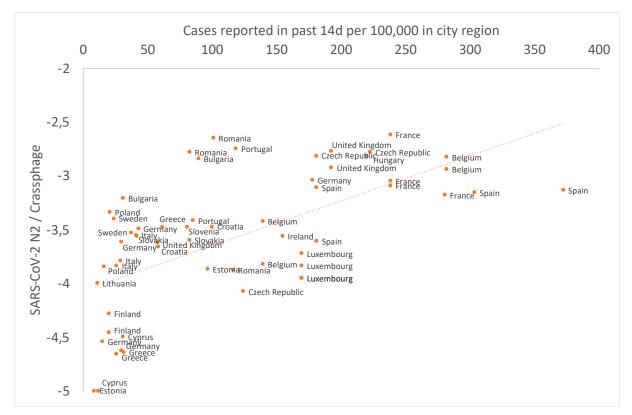


Figure 13 Attempt of flow and population normalization

2.5.2.3. Comparisons between samples measured in both runs

For 27 locations samples were obtained for both, the first and the second round of the sampling campaign. Anonymized data are shown in the Table below.

Anonymous code	N2 gene concen I	tration Round	N2 gene concentration Round II				
	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per ml	STD Gene copies per ml			
Belgium 1	0.1	Nd	4.9	1.2	•		
Belgium 2	4,6	3,0	2,4	0,2	•		
Bulgaria 1	63,7	20,3	67,3	8,7	•		
Croatia 1	23,3	2,5	13,5	2,2	•		
Cyprus 1	Nd	nd	2	0.3	•		
Cyprus 2	nd	nd	nd	nd	•		
Estonia 3	0,8	nd	nd	nd	•		
Estonia 4	8,7	0,5	5,1	2,2	•		
Germany 1	4,5	2,0	25,2	0,6	•		
Germany 2	1,9	1,0	2,9	1,0	•		
Greece 1	5,3	nd	37,1	3,7	•		
Greece 6	10,8	1,9	2,0	0,9	•		
Greece 8	nd	nd	2,2	0,8	•		
Irland 1	1,0	0,5	22,4	9,2	•		
Italy 4	1,1	0,5	4,6	1,8	•		
Latvia 1	nd	nd	nd	nd	•		
Netherland 1	1.6	1.0	27.7	0.5	•		
Netherland 2	8.6	0.0	56.8	0.0	•		
Netherland 3	3.5	1.2	50.9	2.7	•		

Table 6 - Comparison between Round I and II findings on 24 locations

Anonymous code	N2 gene concentration Round I		N2 gene concentration Round II		
	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per ml	STD Gene copies per ml	
Poland 1	946,2	78,7	22,7	0,6	
Spain 1	nd	nd	16,5	4,0	•
Spain 5	10,4	0,7	174,7	25,6	•
Spain 6	2,3	nd	49,4	5,8	•
Spain 7	11,1	6,2	17,3	0,6	•
Spain 8	1,2	nd	14,3	0,3	•
Sweden 1	66,9	0,0	19,4	8,6	•
Sweden 2	346,0	1,0	18,4	1,1	•

The last column illustrates the variation of SARS CoV-2 gene copies concentrations in samples provided for both round I and II by the same participants in a more visual way as "traffic light system": green light indicate a decrease of one order of magnitude of SARS-CoV-2 gene copies in round II compared to round I; yellow light indicates comparable results in terms of gene copies/ ml (i.e.: same order of magnitude) between the two rounds of sampling, while the red light indicates an increase of one order of magnitude of SARS-CoV-2 gene copies in round II samples compared to round I. The comparison has been accomplished according to the following formula:

$$Log \frac{Reduction}{Increase} = -\log 10 \frac{\left[N2 \frac{gc}{mL} \text{Round II}\right]}{\left[N2 \frac{gc}{mL} \text{Round I}\right]}$$

2.5.2.4. Reproducibility of findings

The EU Umbrella study aimed at linking national and regional reference studies, however sharing of data was optional. In case of a few sampling stations local authorities and laboratories decided to share and intercompare their data on the same sample with the data produced by KWR, which acted as reference in this case. The Table below summarizes the findings.

Table 7 - Intercomparison between samples measured by KWR as reference lab and the National reference

Sample code	Average N2 gc/ml Umbrella*	Average N2 gc/ml National*
Luxembourg 1-2	8.4	6.2
Luxembourg 4-2	17.4	9.8

Sample code	Average N2 gc/ml Umbrella*	Average N2 gc/ml National*
Luxembourg 3-2	3.7	4.3
UK 2-2	9.4	10.0
Italy 6-2	5.0	1.2
Italy 7-2	2.0	Nd
Germany 4-2	3.5	Nd
Germany 5-2	15.4	"same cT range"
Portugal 2-2	29.1*	32.0*
Portugal 3-2	32.0*	33.2*
Portugal 1-2	Nd*	33.0*
Finland 3-2	Nd	4.8
Finland 2-2	2.7	3.6
Finland 1-2	1.7	4.6

*Except for Portuguese samples were the E Sarbeco Gene was intercompared

The following further input was provided by the COVIDETECT regarding the findings from Portugal. "Concerning Portugal 1-2, the value from COVIDETECT study was obtained using the 1/4 dilution of nucleic acid extract, since the sample was inhibited in the direct analysis. After making the correction of this value to a direct sample without inhibition, and using the calibration curve of the corresponding RT-qPCR assay, the obtained Ct was 29.7 which is also similar to the EU Umbrella study result.

The main discrepancy of the results between both studies occurs in the sample from Portugal 3-1. Analyzing this result, it is noticeable that the recovery rate of the sample from the EU Umbrella study is very low (0.1%). Furthermore, the crAssphage value reported for this sample is also very low in comparison with the other samples.

IST repeated the crAssphage assay for the samples collected on the 15th September from the three WWTP and the results were very similar among them (between 104-105 GU/mL). So the undetermined value of SARS-CoV-2 for {this sampling point¹} together with the low quantification of the crAssphage, as reported by the EU Umbrella Study, and considering the number of COVID-19 cases reported at the time for the community served by the (Portugal 3)¹ WWTP, indicates that there was an inhibition of the quantification assay by the EU Umbrella Study. On the other hand, the COVIDETECT results had a good recovery and inhibition control for all samples. Serzedelo WWTP receives an important fraction of industrial wastewater, mainly from textile industry containing multiple textile dyes, inorganic salts, and organic additives, which can contribute to the inhibition effect observed in the EU Umbrella Study. This sample requires several optimization assays in order to obtain a correct quantification."

¹ Name of sampling has been replaced to anoymise the results

2.6. Results of the EU Surveys on Costs and Methodologies

A great deal of information on the methodology of SARS-CoV-2 measurements in wastewater has been generated in 2020 and almost at the same time numerous review papers tried to assess the huge amount of knowledge being produced. It would go beyond the scope of this report to summarize those or the benchmark methodologies. The main papers have already been introduced in the beginning and can be retrieved from the literature section.

This process of gathering and evaluating methods is necessary and will continue in close collaboration with the leading expert, research groups and partner organization. Eventually this will result at a much later stage into standardized approaches, guides of best practices and finally formal standards adopted by National, Regional or International Standardization bodies. The pandemic however is evolving rapidly and traditional approaches are too slow. The number of the pre-print paper already being quoted before as a refereeing process may serve as an illustration for this challenge.

However, essential information, which are necessary to evaluate the applicability of an approach and the entailed financial implication, are not readily available. In particular within the scope of this study we found two questions of relevance.

The first refers to the common practices used by the laboratories in Europe in performing sampling, measurements and testing. While review papers in literature compile the number of scientific studies and – at least some – discuss advantages and disadvantages of selected methods, they usually do not consider more simple and fundamental concerns, i.e. the limited resources available when it comes to rollout operations at regional or national scale.

Secondly, the information about the cost of measurement is presumably one of the most difficult information to access, in particular when no real market of competitors exist. While scientists have usually a good grasp on the cost of consumables, reagents and instrumentation, they often lack access to information such as overheads applied, cost of manpower or other hidden factors. Here, the financial information compiled when project proposal is drafted, can help.

In the context of this feasibility assess, a different approach was chosen to compile such information while at the same jointly review assess the information being compiled. In order to access such information two online surveys were conducted using the EU Survey Platform of the European Commission. The first one asks for information on technical aspects covering the whole chain of measurement from sampling to data reporting. Findings of this exercise were then presented to and discussed in a dedicated virtual event. Financial information was retrieved by the same approach and subsequently compared to other informal information, usually shared in webinars or online presentations.

2.6.1. Survey on methodologies applied by participants of the EU Umbrella

A series of 45 questions clustered in different subjects (sampling, sample preparation, RNA extraction, quantification, reporting and access to complementary information) was published in June 2020. The detailed questions and input received can be found as in the annex to this report. On July 17th, 2020 the findings were discussed in an online event organised by European Commission with strong participation of the following organisations, which participated in the moderation of the sessions:

- CEDEX Centro de Estudios y Experimentación de Obras Públicas (represented by Maria Leal)
- RWTH Aachen (represented by Thomas Wintgens)
- University of Cyprus, NIREAS-International Water Research Center (represented by Despo Fatta-Kassinos)
- Universidade Lisboa, Instituto Superior Técnico, (represented by Ricardo Santos)
- KWR The Dutch Water Research Institute (represented by Gertjan Medema)
- The NORMAN Network (represented by Lian Lundy)
- KTH Royal Institute of Technology, Department of Sustainable Development, Environmental Science and Engineering, (represented by Prosun Bhattacharya)
- SUEZ, CETAQUA Water Technology Centre (represented by Marina Arnaldos Orts)

The meeting was on invitation and targeted the participants and supporters of the EU Umbrella Study exploring the feasibility of a system for SARS-CoV-2 Monitoring employing sewers. It started at 14:30 and lasted 140 min. A total of 95 attendees participated in the event, which was recorded. During the meeting the findings of

a survey regarding analytical approaches were presented. The questionnaire, which was circulated before the meeting, was filled in by 20 participants. The questionnaire template, the compiled information, the presentations, the recording of the meeting as well as the chat registration of WARP Event were shared subsequently with all participants.

2.6.1.1. Conclusions of the event

The event resulted in a series of important conclusions summarized hereafter. Many of the actions highlighted, have in the meanwhile been addressed and up-taken.

The participants concluded that a great deal of information regarding analytical methodologies was already generated and the number of publications regarding the successful use of sewer surveillance for SARS-CoV-2 monitoring in wastewater and sewers system is growing steadily. Reports in the press are also increasingly appearing thus creating a growing media attention and public awareness of the approach.

The growing attention was perceived as positive, however, the translation of research findings into an up-scaled and systemic use of sewer surveillance in this context still has to tackle some major challenges, e.g., with regard to the comparability of observed findings and results, many of which stemming from monitoring campaigns addressing different questions or being conducted in different settings, all of which rendering direct comparability of data challenging.

While there is a consensus that untreated wastewater is NOT infectious and contributing to the propagation of COVID-19, it has to be stressed that sewer surveillance is an ADDITIONAL and COMPLEMENTARY source of information useful in understanding epidemiological dynamics and processes. The approach CANNOT replace the ongoing surveillance programs and activities targeting directly individuals. This must always be emphasized.

As regards the data presentation from the evaluation of the responses of the circulated questionnaire, a series of interesting observations can be made. One must bear in mind though that the laboratories adhering to the umbrella initiative may not represent the global main trends and approaches. Organised into 6 blocks the questionnaire contained 45 questions, and the responses indicate some trends and preferences.

With regard to sampling, most assessments use 24 h composite samples as a preference with typical volumes of 500 – 1000 mL taking with automatic composite sampling devices. Time and flow proportional samplings are equally represented. (Sterile) PE containers stored at 4°C are emerging as a frequently used approach and generally additional parameters are documented well.

Sample preparation and all subsequent steps usually happen within 1-2 days after a sample has been taken. The use of Internal Standards (IS) in the sample preparation is common practice but differences do exist in the type of IS used. Typically, an inactivation occurs at 60°C followed by a centrifugation step using different additives.

RNA Extraction procedures are diverse and no clear preferences can be observed, if not, again the use of internal standards for QC purposes.

Quantification is done frequently using one step qPCR and employing N Genes in various combinations with others as gene targets. QA/QC practices are far from being standardized and addressing this is a priority issue. The same applies to reporting of measurement uncertainty. Most laboratories report full or at least partial access to COVID-19 epidemiology statistics and data of their catchment population.

2.6.1.2. A call for a QA/QC Framework

From the afore-described assessment and considering also the comments made during the meeting there is consensus regarding the need for establishing a proper framework of documenting the methods as well as guidance on how to compare and integrate data. The EU Umbrella indeed, has created the necessary encounter platform and gathered the community of practices.

Inter-laboratory comparisons such the ones organized currently by LGC [79] or already performed by others [80] are needed urgently and while the development of certified reference material is highly desirable, the organization of intermittent proficiency testing and ring trials are of pivotal importance. JRC and KWR are exploring pragmatic approaches to organize such a programme and as first point of departure, the comparative compilation of data points from the wastewater treatment plants assessed in the umbrella study and single data obtained by the connected study programmes should be considered. JRC agreed to contact the respective

partners bilaterally. (Note of the authors. *The data are presented above. The organization of an intercomparison is ongoing and scheduled for Spring 2021*.

2.6.1.3. Towards a Sewers Sentinels Guide for best practices

Looking at the survey results, it is not a surprise that a wide array of different methods is used (see for instance Medema et al. [11]). While certainly much of scientific debate will focus on advantages and disadvantages of the different method, the participants agreed on the need to create a common framework to be able to evaluate and combine/integrate the data from different Member States. That is mainly the quality assurance of the methods. It would be good to collectively draft guiding principles for good "*SARS-CoV-2 sewage surveillance practice*". KWR proposed in this context to base this discussion on the QA Guiding Principles used in the EU Umbrella Exercise. Participants agreed to pursue this idea and JRC offered its assistance to coordinate the necessary steps as part of the feasibility assessment and its reporting to the Commission.

2.6.2. Assessing the costs

2.6.2.1. Results of the EU Survey on Costs

The second EU Survey addressed the estimation of costs. As expected the number of participating laboratories was much lower. The following questions were asked in the Online survey:

- When did you start your sewer surveillance program for SARS-CoV-2? If not started yet, indicate a likely start date.
- How long will it run for the time being?
- Do you have a website? If so, can you share the link?
- What type of program is it (national, regional, local, research)?
- Location(s) or area(s) covered by your surveillance activity:
- Estimated population equivalent covered by your surveillance program:
- Currency used to express the following information:
- How many people do you need to take 1 sample?
- How long do they work to take the sample? (NB: This refers to the work time necessary to deploy sampler and retrieve the collected sample)
- If shipment is necessary in the sample collection process, e.g via a courier service, how much do you pay for one shipment on average?
- Considering the information above, how much is the estimated cost to fetch one sample and deliver it to the laboratory?
- How many SARS-CoV-2 measurements do you perform on average per day in your laboratory?
- What is the estimated cost of performing 1 measurement in your laboratory? (Express in your local currency and consider ONLY costs at laboratory level, i.e. without sampling and shipment)
- What cost would you charge for the service from sampling to measurement for one sample?
- How much time is needed from the moment of sample collection to have the result?
- Considering the aforementioned estimates, what is the total cost in your laboratory for 1 sample?
- Assuming one would plan upscaling to a fully-fledged national study, what is you estimated budget need?

A total of 13 groups replied with information from 8 countries, i.e. from Belgium, Hungary, Italy, Luxembourg, Portugal, Spain, the Netherlands and the UK. The participants were asked about the costs for sampling, shipment, laboratory tests, their estimate for costs compared to what they would charge as a service. The detailed results are shown in the Annex of this report. A summary overview is shown in the following table.

Table 8 - Cost estimates retrieved from EU Survey

Cost factor	Average of the reported data	Range reported
Shipment	88 €	20 -400 €
Sampling and field work	140 €	50 -450 €
Estimate for 1 test	176€	50-550 €
Charged cost*	238€	80-750 €
Cost estimate by lab	236 €	60-550 €
Annual running budget for 1 WWTP (two controls per weak)	± 25 000 €	

*value retained for further calculations

On average, the laboratories are able to survey ca 20 wastewater treatment plants, but a vast range of situation was encountered with one laboratory running 80 or more plant surveillances. If one takes these costs estimates and assumes two controls per week (104 measurements per year) laboratories equipped with the necessary instrumentation **require ca. 25 000 € running cost for the annual surveillance of 1 treatment plant.** Differences exist of course due to differences in over-head cost motels and salaries for laboratory staff across the EU. Currently, the Netherlands operate a surveillance programme for all of its 300 treatment plants.

A parallel investigation in the US State of Utah estimated the cost per inhabitants to be 0.10 USD for rural areas (higher shipment) to less than 0.01 USD per inhabitants for urbanised areas [81].

Independent of the information compiled here, Belgium estimated the cost to be ≤ 1.5 million per year to keep up their monitoring programme for 42 wastewater treatment plants covering a large proportion of the Belgian population; these estimates cover costs for sampling, transport of samples, laboratory analysis and associated human resources. Spain estimated the costs at $\leq 200-240$ per sample. In Luxembourg higher minimum costs are expected, i.e. in the range of $\leq 12\ 000 - 15\ 000$ per week if information on COVID-19 prevalence is updated three times per week [82]. According to the same source, WHO stated that in assessing the financial resource requirements for establishing and maintaining wastewater surveillance programmes, the costs of operation and interpretation should be compared to avoided societal costs taking timely public health action.

Based on the information gathered so far, upscaling costs for national rollouts are estimated to amount to 1-3 Mio \in per Member State, depending on the number of the WWTPs to be included in Surveillance Program. The current costs entailed by the EU Umbrella run by the JRC confirmed these figures. For comparison: the development of the CORONA warn app in Germany costed 22.7 Mio \in plus an estimated of 2.5 – 3.5 Mio \in per months in running cost [83], [84]

2.6.2.2. Cost for a rollout considering different sizes of urban agglomerates

In the context of this feasibility assessment, the question arose whether – based on the available information – one could estimate the cost of an EU rollout of wastewater-based surveillance of SARS-CoV-2. This information is indeed essential in order to address future policy options, analyse cost-benefits and eventual reinforce budgetary needs. While it is rather straightforward to calculate such costs in specific projects, it becomes challenging if one approaches regional, national or supra-national scales. In the following, we tried to develop two budgetary scenarios at EU Level, including the necessary resources to build a data platform with a component of knowledge brokering and transfer as well as capacity building. The scenarios also anticipated coverage of a, as large as possible, part of the EU Population by primarily focusing on larger urban agglomerates as the corresponding collection points.

Defining the number of collection points

It is difficult to define accurately the number of possible collection points for the EU. The following considerations are based on the statistical data available from the reporting obligations under the Urban Wastewater Treatment Directive (UWWTD). In 2017, most European countries collected and treated sewage to tertiary level from most of their population. According to the EEA, in EU-27 countries, 69 % of the population were connected to tertiary level treatment and 13 % to secondary level treatment. Countries where less than 80 % of the population were connected to public urban wastewater treatment systems were Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Ireland, Italy, Lithuania, Poland, Romania, Serbia, Slovakia and Slovenia.

The UWWTD defines an agglomeration as *an area where the population and/or economic activities are sufficiently concentrated for urban waste water to be collected and conducted to an urban waste water treatment plant or to a final discharge point.* We use this as a reference.

The size of an agglomeration in terms of generated pollution load is measured in "*population equivalent*" (p.e.). The UWWTD distinguishes between 5 sizes of agglomerates: **Very Small** (2 000 – 10 000 p.e.), **Small** (10 001 – 15 000 p.e.), **Medium** (15 001 – 100 000 p.e.), **Large** (10 0001 – 150 000 p.e.) and **Very Large** (>150 000 p.e.), corresponding to the size of settlements. Table 10 in the Annex provides an overview on the number of agglomerates and their size in EU-27. Calculations that follow, refer to the respective figures in this table.

Collective data space and collaborations including a dashboard

The following estimate outlines the budgetary needs for the development of a web-based platform and information system for a digital epidemic observatory (surveillance and management system), including the necessary accompanying measures of method harmonization and collaborative experimental activities. The system should provide effective science-based and informed decision-support throughout the entire epidemic management cycle, i.e., mitigation, preparedness, response and recovery, including the investigation of various what-if scenarios for strategic planning, linking with EU managed existing data bases for data input and the visualization of outputs.

The final product should be a public platform for the visualization of the spread of pandemics and optimal mitigation actions for risk management, in all the countries of Europe and beyond. Ideally this **data space** will be linked in a non-invasive way to other tools, e.g. the Urban Data Platform Plus (UDPplus), or at least rely on the underlying IT architecture, to avoid redundancies and make best use of tax-payers money. The overall concept is to combine SARS-CoV-2 virus detection measurements data with other types of data and data sources, with modelling (including for instance Artificial Intelligence analysis, spatial data analysis and System Dynamics Modelling) and high visualization techniques and implement them all to form a Decision Support System (DSS) as a web-based platform for the holistic monitoring and risk management of pandemic crises.

The JRC as the Commission's science service has the necessary technical knowhow and infrastructure to design and build such an observatory. This can be done completely in-house, or, as an option to be preferred in close collaboration with external actors and service providers, thus reducing significantly entailed costs, while increasing co-ownership with the community of practices. The activity should build on the successful experiences gained in this Feasibility Assessment and aim at the linking of and exchange between the existing national and regional reference initiatives, while supporting the effort of the WHO and the European Public Health Sector. Whether the JRC should operate such a system after its development and deployment, is rather a political decision, which needs also to consider the JRC's institutional setting.

Based on the information gathered and preliminary calculations made the budget for the development and deployment of this tool is estimated to ca. 750 000 \in for design and deployment plus an estimated ca 120 000 \in running costs per year of operation. Costs for collaborative and experimental measures amount to ca. 150 000 \in per year of operation.

For the following scenarios a cost of $1.020.000 \in$ for the digital system is assumed.

Scenario A - Low Resource Setting

The total reported treatment capacity in EU-27 is 5 500 685 366 p.e.. This is used by 80% of the EU-27 population, i.e. $447.7 \times 0.80 = 358.16$ Mio Inhabitants. Focussing on the respective fraction covered by the very large agglomerates (571), one would cover ca. 43.9 % of the EU population by the surveillance of the 571 single collection points. This assumes that in highly populated areas almost all inhabitants are connected to the sewer system.

The respective average annual operation costs amount to 571 x 25 000 \in = 14 275 000 \in . To this cost, one needs to add the cost of development and operation of the DCP-EU4S of 1 020 000 \in which included the necessary activities on harmonisation and exchange for the first year of operation.

While some countries already operate a sewer surveillance system, other may need to rollout the existing reference project to a more permanent design. It is therefore legitimated to expect for the low resource setting a co-financed approach, in which the EC covers for the EU dimension by 100 % and for the operationalisation by 75%.

SCENARIO A therefore results in a cost estimate of 15 295 000 €, ensuring surveillance of 43.9% of the EU Population.

Scenario B - High Resource Setting

The total reported treatment capacity in EU-27 is 5 500 685 366 p.e.. This is used by 80% of the EU-27 population, i.e. $447.7 \times 0.80 = 358.16$ Mio Inhabitants. Focussing on the respective fraction covered by all medium, large and very large agglomerates (4853 + 348 + 571 = 5772), and assuming that 80% of the EU population is connected to the respective collection points (NB. This is a difference to the scenario above) one would cover ca. 67.2 % of the EU population by the surveillance of all 5 772 single collection points.

With such a high number of collection points the assumed cost of 25 000 \in is a significant over-estimate and has to be corrected. Indeed, the aforementioned EU survey that countries with fully fledged surveillances boosted their laboratories to a four-fold increase of capacity, obviously leading to decrease in the running costs. To compensate for this effect, a net decrease of the annual running costs from 25 000 to 10 000 is therefore assumed.

The respective average annual operation costs amount to 5 772 x 10 000 \in = 57 720 000 \in . To this cost, one needs to add the cost of development and operation of the DCP-EU4S of 1 020 000 \in which included the necessary activities on harmonisation and exchange for the first year of operation.

While some countries already operate a sewer surveillance system, other may need to rollout the existing reference project to a more permanent design. It is therefore legitimated to expect for the low resource setting a co-financed approach, in which the EC covers for the EU dimension by 100 % (1 020 000 \in) and for the operationalisation by 50% (0.5 x 57 720 000 \in).

SCENARIO B therefore results in a cost estimate of 29 880 000 € ensuring surveillance of 67,2% of the EU Population.

3. Knowledge brokerage and transfer

Under the umbrella of the UN World Water Quality Alliance and in coordination with other Commission services, notably DG ENV and DG RTD, an engagement dialogue has been developed, allowing the European Community of Practice to share findings between experts, but most importantly also involving representatives of the European Sectors for Public Health and Water, as well as the local municipalities engaged in sewer surveillance.

Due to the restrictions resulting from the pandemic was organized exclusively by web-based events, so-called Town Hall Meetings, which were announced in the community through networking and also employing Social Media, in particular the LinkedIn and Twitter Accounts of the **EU Science Hub**. In addition, numerous webinar-type of activities and participation in events by other organization ensured a permanent and lively exchange of information and knowledge.

This process was accompanied by frequent meetings organized in ca. 4 weeks intervals with a high-level Stakeholder Steering Group involving the following organizations as well as Commission Services:

Entities engaged in the Steering Group

European Commission

- JRC, Dir D (lead) with invites from Dir B, E and F, as well as permanent invitations HQ
- DG ENV, (lead), Directorate C
- DG SANTE (observer)
- DG RTD (invited, but did not participate)

World Health Organisation (observer)

- Headquarters
- Regional Office Europe

UN Environment Programm (UNEP)

Science Division

European Water Sector Stakeholders

- Water Europe
- EUREAU
- Aqua Publica Europea

National Government Services (direct mandate or mandated through apointment)

- Cyprus: NIREAS-International Water Research Center, University of Cyprus (mandated by the Government of Cyprus)
- Spain: Government of Spain, CEDEX Centro de Estudios Y Experimentacion de Obras Publicas
- Portugal: Grupo Águas de Portugal
- Italy: Istituto Superiore di Sanita
- Germany: Robert-Koch-Institute
- Slovenia: National Institute for Biology

Municipality Associations

• Deutscher Städte- und Gemeindebund (European Office)

Private Sector

• SUEZ (CETAQUA)

Academia and Research

• KWR Water Research Institute²

² acting as core scientific partner in the execution of all experimental activities.

Entities engaged in the Steering Group

- RWTH Aachen³
- UfZ Helmholtz-Zentrum für Umweltforschung
- Winners of the EU Hackathon [70] Sewer4Covid Consortium
- The NORMAN Network

Associated interest groups and organization NOT participating in the Steering Group:

- Global Water Research Coalition
- World Water Quality Alliance

This was decisive for the conclusive evaluation and feedback on the activities being undertaken and served also to ensure that the Feasibility Assessment could keep track of rapid developments and scientific advances in the field. The following table summarizes some of the events attended and the time line of the EU Umbrella Initiative.

Table 9 - List of Key Events	

Date	Event	Organised by
22 April 2020	Initial Video Call between COM, KWR and RWTH starting the activity	EC
08 May 2020	Call Notice published	EC
08 Jun 2020	First Town Hall	EC
24 Jun 2020	Global Water Research Coalition Pitch presentation	GWRC
17 Jul 2020	Warp Event on Methodologies	EC
22 Jul 2020	Second Town Hall	EC
22 Jul 2020	International Biosecurity and Prevention Forum – Webinar on One Health Security	FBI
23 Jul 2020	WHO Europe Rapid Expert Consultation	WHO
09 Oct 2020	Transatlantic Task Force for Antimicrobial Resistances	CDC
04 Nov 2020	Austria Federal Agency for Environment - Webinar	UBA
17 Nov 2020	CEEP Water Task Force Meeting	CEEP
30 Nov 2020	WHO Expert Consultation	WHO
02 Dec 2020	Third Town Hall	СОМ
25 Jan 2021	Kickoff Meeting CoroMoni Project	DWA

³ Acting as core scientific partner in the logistical design of the sampling exercises

A decisive instrument for the knowledge brokering was the regular organization of so-called TOWN HALL Events, which established *de facto* the Community of Practices of wastewater-based surveillance of the virus

3.1. First virtual Town Hall Gathering

On June 8th, 2020 the first virtual Town Hall Gathering took place on the WEBEX Site of the European Commission. It was co-organized between the Directorate-Generals JRC and ENV. Water Europe, EurEau, SUEZ as well as individual researchers from CEDEX, KWR, NIREAS and UfZ actively participated in its organization and supported the event.

A total of 175 attendees participated in the 3h event, which was recorded. The event allowed for an animated discussion using the WEBEX chat function. A series of topics requiring a priority follow up emerged and are summarized hereafter:

- <u>Inclusiveness and Openness</u>: Numerous international, national, regional and local activities are happening in parallel and the EU Umbrella Initiative relies on their inclusion and collaboration in the exploring the feasibility of an Early Warning or Monitoring System for SARS-CoV-2 employing sewers. Each of the study pursuits specific questions and follows different designs and approaches, all of which are per se equal and should be part of this initiative. While this requires a great deal of proactive openness, data confidentiality and personal data rights are to be ensured and protected.
- <u>Sampling</u>: While the protocol developed and deployed by KWR [74] emerges as *de facto* reference, great difference in sampling time, selection of sampling points and time-integration exist. Also intermediate storage conditions such as temperatures are a source of difference. While 24 composite sample emerged as frequently used approach, more targeted sampling considering the morning routines which in return are reflected in higher concentration of genetic material from SARS-CoV-2 could greatly enhance detection limits. Similar consideration is to be given with regard to the frequency of sampling (daily, weekly or anything in between). The typology of sewer systems (combined or separated systems for rainwater), make a given approach more vulnerable with regard to rain or other meteorological conditions.
- <u>Analytical Methodology</u>: The time allocated for this topic was not sufficient, but the need to exchange
 and compare critically methodologies, use of additives, influence of coagulants or protocols used to
 concentrate the genetic material emerged as issues of priority and concern. The need to quickly
 exchange methods, e.g. using a platform such as <u>https://www.protocols.io</u> was seen as paramount.
 Other platforms exist but were not discussed explicitly.
- <u>QA/QC</u>: The recently launched Reference Material for positive control of SARS-CoV-2 /COVID-19 [77] is
 used by many laboratories. The same applies for deactivated virus material, e.g. from NIB [85]. Many
 participants asked for the organization of targeted laboratory intercomparison exercises. The
 opportunity to collaborative field trials was also mentioned by some and the EU Umbrella Initiative will
 investigate to organize these. Other measures such as sequencing, were mentioned briefly in the chat.
- <u>Surrogates and additional parameters</u>: The COVID-19 disease inevitably results in an increased use of certain pharmaceuticals for its treatment. At this stage, it remains unclear if and to which extend residues of such pharmaceuticals' active ingredients can be used as additional tracer, but few groups reported about ongoing investigations. It appears also that the proper interpretation of the RNA material would be facilitated by the collection of additional information such as generic parameters characterizing the influent as well as further microbiological indicators. This needs to be documented better. Data reporting templates are currently being developed by some groups and further harmonization of them is seen as beneficial.
- <u>Interaction with health services and epidemiologists</u>: This is certainly of pivotal importance, both, for the critical review of observed findings, as for the use of such information. The correlation and significance of correlation between the current epidemiological situation in a population and the concentration of RNA material in sewage is likely to exist, but need to be understood better. This requires an unprecedented dialogue between water utilities, investigating laboratories and local/national health services. Here the Commission can be an important facilitator.
- <u>Data hosting and Decision support</u>: The so-called Pillar III of the EU Umbrella Initiative seeks to transform collect data into knowledge and subsequently make recommendations for actions. The EU

Hackathoners from SEWERS4Covid gave an impressive presentation of the possibilities stemming from data sharing and use of machine-learning features. It is clear that this process needs to be speeded up and embedded into existing structures such as the European Centre for Disease Control or the Urban Data Platform.

 <u>Knowledge Transfer and International exchange</u>: Presentations from UNEP's World Water Quality Alliance, as well as from the Union for the Mediterranean highlighted the URGENT need to share and transfer the collect know-how and knowledge as quickly as possible to realities outside the EU. Whereas in the EU such a sewer-based monitoring system can be seen only as "additional" information, it may be the only information system in other realities. This needs to be developed further.

3.2. Second virtual Town Hall Gathering

The second virtual event took place on July 22nd, 2020. It was co-organized between the European Commission (the Directorate-Generals JRC and ENV) managing the first part of the meeting with a focus on the European Umbrella Initiative and UNEP and the UN World Water Quality Alliance, presiding the second part.

Following a successful first event, this second Virtual Town Hall Event aimed at:

- informing the Community of Practice
- organising an initial step to explore also global rollout options along with a new understanding between health and environment.

Corner stone in here is to collectively define the criteria for "use cases" in different regions and settings. The meeting was accessible to the connected community without registration. It started at 10:30 with Part I focusing on the EU Dimension and continued with Part II to until 14:30. A total of 224 attendees joined and the gathering was recorded.

At the opening of the meeting, O. Schmoll from the WHO Regional Office for Europe, informed the participants about the interest of the WHO in the approach During part I of the meeting (chaired by the EC) progress since the first event were presented including the findings and outcomes of a micro-event dedicated to analytical methodologies and needs. Specific insights into the reference studies being run by Italy, Portugal, the UK, Turkey and France were provided, too.

Part II of the meeting, which was chaired by UNEP, focused on the renaissance of interest in relationship between health and the environment and provided an insight into the wider picture of the COVID-19 crisis and its relationship with water quality and availability.

In order to ensure also the best synergy with the international community, activities under this umbrella are now also coordinated with the WHO (HQ and Regional Office for Europe, https://www.euro.who.int/en/home) and UNEP, the UN Environment Program, which convenes the World Water Quality Alliance (WWQA, https://communities.unep.org/display/WWQA) which counts 50+ partners across major groups and stakeholders focusing on the developing world and the environment/health feedback dynamics.

3.2.1 Observations on analytical methodologies

A great deal of information regarding analytical methodologies is being generated and the number of publications regarding the successful use of sewer surveillance for SARS-CoV-2 monitoring in wastewater and sewers system is growing steadily, as shown above. Reports in the press are also increasingly appearing thus creating a growing media attention and public awareness of the approach. The growing attention is certainly positive, however, the translation of research findings into an up scaled and systemic use of sewer surveillance in this context still has to tackle some major challenges, e.g. with regard to the comparability of observed findings and results, many of which stemming from monitoring campaigns addressing different questions or being conducted in different settings, all of which rend the direct comparability of data challenging.

As stated already above, the surveillance of sewage and the sewer sheds can only be seen as an ADDITIONAL and COMPLEMENTARY tool, allowing to gain further insights into epidemiological dynamics and processes.

The approach CANNOT replace the ongoing surveillance programs and activities targeting directly individuals. There is consensus that there is a need for establishing a proper framework of documenting the methods as well as guidance on how to compare and integrate data. In this context, inter-laboratory comparisons and related measures are needed urgently. While the development of certified reference material is highly desirable, the organization of intermittent proficiency testing and ring trials are important. To this end, a comparative compilation of data points from the wastewater treatment plants assessed in the second round of umbrella study will be organised. Likewise, a joint exercise should be used to create a common framework to be able to evaluate and combine/integrate the data from different Member States. Rather in focusing on one standardized method, a collectively drafted "Good SARS-CoV-2 sewage surveillance practice" was recommended.

3.2.2 Looking beyond SARS-CoV-2

The possibility of SARS-CoV-2 assessments using wastewater is a new aspect in the nexus between water and health. Evidence showed that the COVID19 crisis puts additional pressure on water resources, e.g. by an increased water consumption for hygiene, an effect particularly visible in situation of water scarcity. Thus, the simple recommendation of hand washing with soap led to a 5% increase of water demand for households in the Arab region.

The crisis further aggravates the already precarious situation with regard to WASH, in particular in conditions of extreme poverty or conflicts. Thus, it is estimated that 26 million refugees and internally displaced persons in the Arab region are affected by this.

The Global Waste Water Initiative as part of UNEP Global Programme of Measures tries to address and mitigate these effects, but it is clear that while awareness is raising, the necessary actions and measures are not sufficient to meet the demand.

While much effort is put into the fight against the SARS-CoV-2 pandemic, the COVID19 crisis' aftermath will have an even stronger impact on access to clean water as well as the preservation of water quality of inland water bodies. The already now visible increase in plastic pollution from the disposal of masks and other personal protection devices will further contribute to aggravate the picture. Sewer Surveillance of SARS-CoV-2 is an important and viable approach to face the challenge.

The virus connection to water, however, also reminds us that only in a concerted approach across boundaries of geography, scientific disciplines and political interest, can we manage to overcome what can be called the biggest challenge we have had to face so far in the 21st century.

3.3. 3rd Town Hall

The Third Town Hall Meeting took place as WEBEX Web-Conference on December 2nd, 2020. It was organized by the European Commission (the Directorate-Generals JRC and ENV and involving SANTE).

This third Virtual Town Hall Event, among others, aimed at presenting an update on the state-of-play regarding the necessary dialogue between the water sector and the public health sector. The meeting was accessible to the connected community without registration A total of 270 attendees joined the gathering. The recording of the meeting as well as the chat registration and presentations (as far as made available) were shared and accessible for download until the 18th of February, 2021, data after which download was no longer possible. The material is owned by the respective institutions and explicit consent has to be asked for in case of further use.

3.3.1. Main findings and conclusions

The WHO Regional Office organized an expert consultation on this topic on 30 November 2020, and 0. Schmoll provided a summary overview of its main findings. The main focus of the event was then on harmonized presentation of the state of play of selected initiatives from Austria, Estonia, Finland, Greece, Italy, Luxembourg, Portugal, Spain, Turkey and the Netherlands. Participants were invited to follow a structuring aid addressing the following issues:

- The partnership carrying out an activity including information on purpose, time line and funding sources
- Information on the methodology and sampling network
- A current update on the state-of-play
- The activities liaison with the Public Health Service
- An illustration how data are used and visualized
- Press and media coverage

• Scientific highlight and reference of relevant publications

The INNO4COV19 Project presented finance opportunities for proof of concept and innovations related to the environmental surveillances. An update on the Global Water Research Coalition Work was provided, too.

The importance of the work conducted and the need to channel the relevant outcome to the policy level was highlighted by M. Sponar (DHoU, ENV.C.2). A permanent surveillance system or "Sentinel System" will need some further discussion about the necessary financing to be provided. It is clear that information encoded in wastewater, has a significant potential not only from an epidemiological perspective as addressed here, but also with regard to numerous other application fields, any of which with a relationship to public health, e.g. use of pharmaceuticals, drugs-of-abuse or food additives, to name but a few. Accessing such information has become technically possible, but entails also a series of ethical considerations, which need to be addressed. In this regard it is also of pivotal importance to share the information in a language accessible to the non-expert and interested lay person.

The EU Umbrella Study in this regard was an important step forward. It covered 25 countries and in both collaborative rounds a total of 174 samples were processed. 13 Countries participated in both round and the results obtained allowed to generate a first approach towards a simple "traffic light" system capturing significant changes in the viral load. Valuable information regarding the influence of weather conditions could also be obtained. Furthermore, for a limited number of samples it was possible to intercompare analytical findings obtained in different laboratories on the same sample. The findings indicate a good agreement, but a more systematic proficiency testing is necessary and was announced at the meeting.

An important information obtained by the Umbrella Exercise was the information resulting from an EU Survey on operational costs. Based on the data submitted it was concluded that the annual running budget for the systematic surveillance of a wastewater treatment plant is estimated to $25000 \in$ per year. The estimate was confirmed independently by other assessments.

The outreach to and involvement of the public health sector emerged as crucial element. Clarity is needed on how data from wastewater-based epidemiology can be integrated into other surveillance data and how decision making can rely on such information. In this regard the recent WHO expert consultation provided important insights:

- There is growing consensus that wastewater-based epidemiology can provided essential complimentary information regarding the spreading of the SARS-CoV-2 virus. The experience in several countries confirm the viability of the approach.
- Wastewater-based surveillance does not aim to replace clinical investigations, but delivers additional insights, e.g. the identification of relative trends. It is seen a secondary tool to detect the virus in absence of clinical trials, e.g. in low prevalence settings. It is to be expected that the importance of waste-based surveillance will increase, when traditional testing starts to diminish.
- The early warning function of the approach in the alert phase of the pandemic has been recognized, including for sewer-sub-catchments. It appears also to be useful to spot re-surges in the tailing phase of the pandemic.
- The use of publicly accessible dashboards is seen to be a useful tool to engage with citizens and to stimulate a vigilance in adhering to public health advice.
- Since the health sector is the "end user" of information from wastewater surveillance, it should be in the lead/co-lead in setting up such systems. This applies to the design phase, the correlation with other data as well as the communication of their meaning to the general public. The health sector should therefore be involved from the very beginning.
- A closer link between the water/sanitation sector, the public health sector and the local municipal level is therefore of utmost importance from the very beginning.
- Data normalization and harmonization of protocols remain a challenge to be addressed.

3.4. Dialogue with the Health Sector

While much has been said about the need to properly treat wastewater and sewage prior to its reintroduction into the natural water cycle, it appears the notion of what we can get out of wastewater is barely developed. The present exercise shows that the information encoded as such is of immense value when it comes to better understand the processes ongoing in an urban dwelling. In addition to this there is the huge and still untapped potential in terms of resource and energy recovery from sewage. It appears that in many regards its crucial

position at a key interlinkage within what is commonly called the Nexus between water, energy, food, ecosystems and health make sewage an element to be considered when it comes in addressing some of the related UN Sustainability Development Goals, also and in particular beyond the mere focus on SDG6, i.e. Clean water for all.

In many regards, the establishment of Sewage Sentinel System would allow to access what best can be described as "alternative and hidden" internet or "fingerprinting system", i.e. a stream of information related to behavior, decisions and actions of individual users of the sewer system. It requires a major effort in digitalization and de-codification of the data stored in wastewater, but would offer an important insight into the urban human habitat.

Not by chance, the wastewater-based epidemiology is explicitly recognized also by the EC Communication towards a European Health Union, as a tool to address and cope with emerging and future issues. The Communication can be accessed here: <u>https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020DC0724&from=EN</u>.

4. Outlook, perspectives and conclusions

4.1. Envisaged next actions

The following next actions are envisaged:

- The Dutch Water Research Institute KWR and the JRC are preparing a proficiency testing exercise to be launched in early 2021. The PT scheme aims at addressing pertinent questions of method comparability and metrology as well as the necessary assessment of measurement uncertainty and validation. Further details follow.
- 2. Development of a Q&A Manual for operators and practitioners. The JRC in close collaboration with WHO envisages with input from the selected experts to develop and present a practical Q&A Manual to operators of wastewater treatment plants and sewer system illustrating standard operation procedures for sewage sentinels. The drafting process will involve representative from health authorities and the WHO as well as representatives of the European Water Sector. Interested experts and projects, who which to contribute to this process are invited to contact the JRC.
- 3. Sewage Sentinels looking beyond. Urban wastewater is a direct result of human activities in an urban environment and the occurrence and levels of microbiological, chemical and physical pollutants mirror this. The use of encoded information in treated and untreated wastewater is also the basis for risk management approaches in the management of the wastewater treatment process and the benchmarking of technologies used in this. Public Health concerns are at the origin of wastewater sanitation as we know it today and in this perspective the data obtained at the inlet of treatment plant are very valuable for Public Health Assessment, indeed. The Global Sewage Initiative, the use of sewers for polio monitoring, but also the EU-wide snapshot exercises, the latter being organised by the JRC in support to the Water Acquis proof this systemic viability of this approach. The refit exercise of the Urban Waste Water Treatment Directive offers an opportunity to look at a pan European Sewage Sentinel System and what it could deliver beyond the current pandemic crisis. This work aims also in developing a different perception of sewers and sewage treatment as integral organs of human settlements thus underpinning the zero-pollution objective set out by the European Recovery Plan and the European Green Deal.

4.2. From data generation to decision support

The EC is currently exploring to develop and propose the deployment of a systemic Sentinel Mechanisms which based on the information encoded in the pollution load reaching wastewater treatment, facing the challenging task of its removal AND reclamation of water, resources and energy. This activity will be linked also closely to the various work streams being developed under the remits of UNEP's World Water Quality Alliance (WWQA). While the information obtained in the course of this exercise as well as in the numerous reference activities and projects confirm the viability of obtaining relevant information regarding the prevalence of the virus in population connected to a specific sewer shed, much work is to be done to harmonized data visualization and use of such information. An emerging issue of concern is also the virus's ability to mutate. New variants appear and gene sequencing delivers quickly such information from the analysis of wastewater.

This requires however a more systematic and organized approach, co-organized with the Public Health Sector, which is the end user of the respective information. The aim of the forthcoming activities must therefore focus on the development and deployment of a decision support and information system, possibly connect to or feeding into the Urban Data Platform or similar data platforms. In this context an additional challenge stems from fact that data obtained by a Sewage Sentinel System are sensitive information and subject to both, ethical standards as well as potentially also data protection, the latter being handled by the General Data Protection Regulation (EU) 2016/679.

Investigation of wastewater for the detection of signals of SARS-CoV-2 is fundamentally an application of public health surveillance and must be governed by appropriate ethical guidance. Starting from the WHO Guidelines public health surveillance (WHO, 2017) the Canadian Water Network therefore developed and proposed a set of guiding principles defining an ethical framework regarding the use of wastewater-based surveillance data from SARS-CoV-2 [86]. Based on this work the following fourteen of the WHO guidelines have been identified by the Canadian Water Network as applicable to SARS-CoV-2 surveillance employing wastewater:

- 1. WHO Guideline 1. Countries have an obligation to develop appropriate, feasible, sustainable public health surveillance systems. Surveillance systems should have a clear purpose and a plan for data collection, analysis, use and dissemination based on relevant public health priorities.
- 2. WHO Guideline 3. Surveillance data should be collected only for a legitimate public health purpose.
- 3. WHO Guideline 4. Countries have an obligation to ensure that the data collected are of sufficient quality, including being timely, reliable and valid, to achieve public health goals.
- 4. WHO Guideline 7. The values and concerns of communities should be taken into account in planning, implementing and using data from surveillance.
- 5. WHO Guideline 8. Those responsible for surveillance should identify, evaluate, minimize and disclose risks for harm before surveillance is conducted. Monitoring for harm should be continuous, and, when any identified, appropriate action should be taken to mitigate it.
- 6. WHO Guideline 9. Surveillance of individuals or groups who are particularly susceptible to disease, harm or injustice is critical and demands careful scrutiny to avoid the imposition of unnecessary additional burdens.
- 7. WHO Guideline 10. Governments <u>and others</u> who hold surveillance data must ensure that identifiable data are appropriately secured.
- 8. WHO Guideline 11. Under certain circumstances, the collection of names or identifiable data is justified.
- 9. WHO Guideline 12. Individuals have an obligation to contribute to surveillance when reliable, valid, complete data sets are required and relevant protection is in place. Under these circumstances, informed consent is not ethically required.
- 10. WHO Guideline 13. Results of surveillance must be effectively communicated to relevant target audiences.
- 11. WHO Guideline 14. With appropriate safeguards and justification, those responsible for public health surveillance have an obligation to share data with other national and international public health agencies.
- 12. WHO Guideline 15. During a public health emergency, it is imperative that all parties involved in surveillance share data in a timely fashion.
- 13. WHO Guideline 16. With appropriate justification and safeguards, public health agencies may use or share surveillance data for research purposes.
- 14. WHO Guideline 17. Personally-identifiable surveillance data should not be shared with agencies that are likely to use them to take action against individuals or for uses unrelated to public health.

It is recommended to elaborate and adapt these principles in the following activities. Likewise, care must be taken to properly inform the general public in a neutral way. This includes timely release of new findings in an appropriate way and organize events in an inclusive and open manner.

4.3. Conclusions

The feasibility assessment of a SARS-CoV-2 Sewage Sentinel System proofed that

- 1. the use of wastewater monitoring to track Covid-19 and its variants is technically feasible and financially viable. As such it should be recommended as an additional surveillance tool completing information obtained by swab testing, blood investigations or tracing apps.
- 2. Wastewater monitoring should be considered as a complementary and independent approach to COVID-19 surveillance and testing strategies. Surveillance of SARS-CoV-2 in wastewater can provide important complementary and independent information to public health decision-making process in the context of the ongoing COVID-19 pandemic. As a consequence, waste water monitoring needs to be included more systematically in the national testing strategies for the detection of the SARS-CoV-2 virus.

- 3. Common methods for sampling, measurement and analysis should be made available and used in practice to ensure that the data collected is reliable and comparable.
- 4. The surveillance system should cover a significant part of the Member State's population. The monitoring system should include at least wastewaters from larger cities with over 150000 inhabitants, preferably with a minimum sampling frequency of two samples per week. When necessary, additional sampling sites may be selected either to cover a sufficient part of the population or to better understand virus circulation related to possible movements of population through different territories (e.g. touristic sites during the summer season).
- 5. The minimum sampling frequency and geographical coverage should be adapted according to the epidemiological situation:
 - a. When the competent public health authorities assess that, based on the local epidemiological situation, the pandemic is not a risk to the local population, the minimum sampling frequency should be reduced to one sample per week;
 - b. When the disease is only present in some parts of the territory the minimum sampling frequency should be either decreased or increased depending on local circumstances.
- 6. The samples should be taken at inlets to wastewater treatment plants or where relevant upstream at the wastewater collecting networks.
- 7. When more specific information is required to better map the presence of the virus and its variants, including among vulnerable communities, additional timely sampling and analysis should be carried out in targeted locations of the wastewater collecting network that corresponds to the population centre of concern. The definition of the locations and of the sampling frequencies should be adapted to the local needs (e.g. main sewer catchments and sub-systems of interest connected for instance to parts of the cities, hospitals, schools, university campuses, airports, other transport hubs, retirement centres, prisons, etc.).
- 8. The results of the wastewater surveillance should be shared promptly by electronic means to the competent public health authorities. The creation of a European exchange platform should further facilitate rollout and harmonisation. For early warning surveillance purposes, the results for each sample should be recorded as soon as possible and preferably no later than 48 hours following sample collection.
- 9. To ensure an appropriate interpretation of the results but also to adapt the surveillance system to public health needs, adequate structures are need. These must involve both, health and wastewater competent authorities with the objective to merge and link relevant datasets and to coordinate the interpretation and communication of results.
- 10. Particular attention to ethical considerations is necessary: wastewater surveillance is an integral part of public health surveillance and therefore should comply with the same ethical principles, as set out in the 2017 WHO guidelines on ethical issues in public health surveillance.

New virus variants are evolving and spreading in Europe and across the world. The higher transmissibility and propensity of some of them to cause more severe disease, constitute a threat to our response against the virus. It is therefore important to use all available means to detect these variants as soon as possible to provide appropriate and timely responses. This work is intended as contribution to rollout a European Sewage Sentinel System for SARS-CoV-2 and its variants as well as other emerging issues of growing concern such as other emerging pathogens with a focus on anti-microbial resistances, as well as chemical and physical pollutants of concern including microplastics, pharmaceuticals or others.

Indeed, the systematic investigation of a broader range of pollutants can also become instrumental in the monitoring of efficiency of the implementation of policies related to Green Deal, in particular with the aim to reach the Zero-Pollution ambition. Wastewater treatment has been perceived for too long as an "end-of-the-pipe process" and the current initiative allows to move beyond this perception.

Based on the work presented here and at the moment this report is published, the European Commission has already initiated the next steps under what has been called the HERA Incubator, which identifies a clear role for wastewater-based epidemiology in the surveillance of SARS-CoV-2 and its variants [87]. Indeed, in March 2021, the European Commission recommended Member States to roll out systematically sewage surveillance and collaborate with the Commission in building of what we call the EU Sewage Sentinel System for SARS-CoV-2 (EU4S) (Commission Recommendation (EU) 2021/472 of 17 March 2021 on a common approach to establish a systematic surveillance of SARS-CoV-2 and its variants in wastewaters in the EU C/2021/1925). https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32021H0472&from=EN, [88].

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List of abbreviations and definitions

BSA	Bovine Serum Albumine	
CDC	Centers for Disease Control and Prevention	
CEDEX	Centro de Estudios y Experimentación de Obras Públicas	
CEDEX	Centro de Estudios Y Experimentacion de Obras Publicas	
COVID-19	Corona Virus Disease 2019	
DG-ENV	Directorate-General for Environment	
DHoU	Deputy head of Unit	
DCP-EU4S	Digital Information Platform EU Sewage Sentinel System for SARS CoV-2	
EU	European Union	
GWRC	Global Water Research Coalition	
HHS	US Department of Health and Human Services	
ISS	Italian National Institute for Health	
JRC	Joint Research Centre	
КТН	Swedish KTH Royal Institute for Technology	
LIST	Luxembourg Institute of Science and Technology	
MHV	Mouse Hepatitis Virus	
NWSS	US National Wastewater Surveillance System	
p.e.	population equivalent	
PCR	Polymerase Chain Reaction	
PCR	Polymerase Chain Reaction	
Q&A	Question & Answer	
QA/QC	Quality Assurance/Quality Control	
qRT-PCR	Real-Time Quantitative Reverse Transcription PCR	
RIVM	Dutch National Institute for Public Health and the Environment	
RNA	Ribonucleic acid	
RT-ddPCR	Real-Time Droplet-Digital PCR	
SARS CoV-2	Severe Acute Respiratory Syndrome Coronavirus 2	
SPGE	Société publique de gestion de l'eau	
SUEN	Turkish Water Institute	
THL	Finnish Institute for Health and Welfare	
UCM	University of California, Merced	
UDPplus	Urban Data Platform Plus	
VWS	Dutch Ministry of Health, Welfare and Sports	
WBE	Wastewater-based Epidemiology	
WHO	World Health Organisation	
WRI	Slovak National Water Research institute	
WWTP	Wastewater Treatment Plant	

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Annex 1 Call Notice

CALL NOTICE

Feasibility assessment for an EU-wide Wastewater Monitoring System for SARS-CoV-2 Surveillance.

The European Commission's Joint Research Centre and the Directorate-General for Environment, are teaming up with the EU Hackathon's winners SEWERS4Covid (the Dutch Water Research Institute KWR, Eurecat – Technology Centre of Catalonia (Spain), University of Thessaly and National Technical University of Athens (Greece), and University of Exeter (UK) and the Rheinisch-Westfälische Technische Hochschule in Aachen RWTH (DE). Assisted by Water Europe and EurEau we call for participation in an adhoc pan-European Feasibility Assessment aiming at exploring the development of a wastewater-based monitoring exercise for SARS-CoV-2 and exchange of experiences in SARS-CoV-2 monitoring in wastewater.

Evidence is increasing that untreated wastewater is a good indicator of the presence of the virus in a population. The ability to detect the current SARS-CoV-2 in wastewater is increasingly being reported independently by various research groups as a possible way to better quantify and understand its approximate overall presence in the population. Upon the first confirmation of the virus RNA appearing in stools of COVID-19 patients, research groups in the Netherlands, Australia, United States, France, Italy, Austria and elsewhere have successfully established a relationship between the virus's concentration in influents to wastewater treatment plant and the level of infection in the population in question. Thus, wastewater surveillance of SARS-CoV-2 eventually combined with the monitoring of pharmaceuticals used in the treatment of COVID-19 is likely to be a valuable and efficient tool to monitor virus circulation in EU cities and towns and could serve as early warning for re-emergence in Europe and beyond, providing also specific data analytics on the monitoring. In order to gather the ongoing efforts and to streamline protocols while facilitating the exchange of knowledge, interested research groups are invited to contact immediately the Joint Research Centre at JRCWATERLAB@ec.europa.eu.

A spontaneous snapshot exercise is taking place employing a previously used EU-wide monitoring mechanism at a selected number of wastewater treatment plants (preferably with information about the infection levels in the connected catchment areas). This data and methods will be shared as a standard reference to enable the direct comparison between individual research activities that are taking place thus constituting a Wastewater Monitoring System for SARS-CoV-2. Participation in this exercise is free of charge and results generated will be exploited jointly. This includes the organisation of webinars and web-conferences once data are available.

Annex 2 Standard Operating Procedure

STANDARD OPERATION PROCEDURE (SOP) WASTEWATER SAMPLING, TRANSPORT AND STORAGE FOR SARS-CoV-2 RNA ANALYSIS

Safety

Sewage sampling may expose you to sewage, which is generally contaminated with pathogenic micro-organisms. Adhere to your national Occupational Health and Safety regulations and guidelines and site-specific Health and Safety Plans. When applied properly, the standard protection is also adequately protecting you against SARS-CoV-2. At a minimum use latex gloves or similar when sampling and apply proper personal hygiene.

Chain of custody

Collected samples are in the custody of the sampler or sample custodian until the samples are relinquished to another party.

- Documentation of field sampling is done in a sample form (Annex A: Sample Form).
- Shipped samples shall conform to all EU hazardous materials shipping requirements.
- Chain-of-custody documents (Annex B) shall be filled out and remain with the samples until custody is transferred to the receiving laboratory

Scope

This protocol describes how to transfer samples from 24h composite (auto) samplers that are installed at the inlet of the wastewater treatment or similar sample matrices.

For surveillance of wastewater for SARS-CoV-2 RNA, 24h composite samples are required, because of the inherent variability in virus shedding and sewer flows. The composite sample should be taken at the inlet of the wastewater treatment plant, after the screening and grit removal steps and at a site that is well-mixed. The composite sample should be high frequency, and preferably flow-proportional composite and refrigerated during the sampling period. Volume or time composite sampling over 24 h is acceptable. The composite sampler should adhere to requirements for composite sampling

(see for example https://www.epa.gov/sites/production/files/2017-07/documents/wastewater sampling306 af.r4.pdf).

Prior to transfer of the sample from the composite sampler, the proper operation of the composite sampler over the last 24h and the maintenance status and calibration should be confirmed and documented on the Sample Form.

Materials

- 1. Standard Operating Procedure
- 2. Sample Form (Annex A)
- 3. Chain of Custody (Annex B)
- 4. Sample containers: eight sterile 50 ml centrifuge tubes (Greiner bio-one, Tube, 50 ml, PP 30/115 mm, conical bottom. REF: 227261 or equivalent)
- 5. Tube rack
- 6. Permanent markers
- 7. Ice (packs) to be immediately placed at -20°C (they must be ready the day of sample collection).
- 8. Ziplock plastic bag for samples
- 9. Polystyrene box

Sample Collection Procedure

- 1. The day before the sampling (preferably on Monday or Tuesday), contact the JRC contact person (see below) to announce the forthcoming collection.
- 2. JRC personnel will appoint DHL to create a pick-up request for the following day and inform KWR.
- 3. Meanwhile, JRC personnel will provide you by email with the DHL label to be used for requesting the pick-up at your national DHL office after sampling.
- 4. The day of sampling check the correctness of sample container label (i.e.: sampling location and location code) with the data reported on the sample form.

- 5. Wear Personnel Protective Equipment (gloves + national OHS guidelines), using new gloves each time a different location is sampled.
- 6. Wear Sample Protective Equipment: surgical face mask.
- 7. Record time and date and other required information on the sample form.
- 8. Remove the tube covers and protect from contamination.
- 9. From the 24-hour composite, refrigerated wastewater sampler (from the plant inlet, post grit chamber) pour slowly approx. 50 ml into each sample container.
- 10. Tightly close the containers and place in the tube rack in the cooler on ice (packs).
- 11. Fill the "Other remarks" section of the Sample Form. At minimum record the total influent flow over the past 24h. Record other data if available.
- 12. Store the samples at +6°C until the delivery (if not immediate, otherwise see point 13).
- 13. The day of the delivery, insert the rack full of samples in the ziplock plastic bag, close it and put it in the polystyrene box.
- 14. Place the ice packs and close the polystyrene box.
- 15. Sign the Sample Form (Annex A) and place it over the polystyrene lid within the box.
- 16. Fill and sign the Chain of Custody form (Annex B) and place it over the polystyrene lid within the box.
 - 17. Reassemble the box and launch the pick-up procedure with your national DHL office, using the DHL label received by the JRC (please consider that pick-up requests forwarded to DHL by 10:00 am will be processed in the afternoon on the same day; pick-up requests forwarded to DHL in the afternoon will be processed in the afternoon of the following day).

JRC Contact Persons:

SIMONA TAVAZZI	GIULIO MARIANI	HELLE SKEJO
European Commission	European Commission	European Commission
Joint Research Centre	Joint Research Centre	Joint Research Centre
Directorate D – Sustainable Resources	Directorate D – Sustainable Resources	Directorate D – Sustainable Resources
Unit D.02 Water and Marine Resources	Unit D.02 Water and Marine Resources	Unit D.02 Water and Marine Resources
Via E. Fermi 2749,	Via E. Fermi 2749,	Via E. Fermi 2749,
T.P. 120I-21027 Ispra (VA), Italy	T.P. 120I-21027 Ispra (VA), Italy	T.P. 120I-21027 Ispra (VA), Italy
Phone: +39 0332 783683	Phone: +39 0332 786781	Phone: +39 0332 785522
e- mail: <u>simona.tavazzi@ec.europa.e</u> <u>u</u>	e- mail: <u>giulio.mariani@ec.europa.eu</u>	e-mail: <u>helle.skejo@ec.europa.eu</u>

Annex A: Sample Form

Name of	wastewater	
treatment	plant	e.g.: NOSEDO, Milan Italy
(WWTP)		

Geographic coordinates: (WGS84; decimal degrees; e.g. N 44.8893; E 11.605) or (Degrees, Minutes & Seconds e.g. 44°53.36, 11°36.30)	Latitude: 45.42641 Longitude: 9.22170		
Address of WWTP – street and number	Via San Dionigi, 90		
Zip code of WWTP	20131		
City of WWTP	Milan		
Sampling Date: (dd/mm/yy)	May 8, 2020		
Composite sample time of collection (hh:mm)	10.32		
Composite duration	24.00 hour		
Composite type	Flow composite		
Composite aliquots	10 ml every 1000 liter		
	Sample Location Code	Net weight (g)	Full weight (g)
	0074_INF_20093_IT_01	хх	
	0074_INF_20094_IT_01	хх	
	0074_INF_20095_IT_01	хх	
Sample ID	0074_INF_20096_IT_01	хх	
	0074_INF_20097_IT_01	хх	
	0074_INF_20098_IT_01	хх	
	0074_INF_20099_IT_01	хх	

	0074_INF_20100_IT_01	хх	
Proper operation of composite sampler in past 24h	Confirmed		
Last calibration date of composite sampler	April, 12, 2020		
Inlet volume of past 24h (m ³)	320,456		
	Influent flow over past 24 h (m3)		REQUIRED!
	Weather		
	BOD (mg/l)		
	COD (mg/l)		
Other remarks	N (mg/l)		
Other remarks	P (mg/l)		
	T (°C)		
	рН		
	SS (mg/L)		
	E.coli (CFU/100ml)		

Annex B: Chain of custody

	Name	
WWTP person of contact (please use block letters)	Affiliation	
	Email	

	Phone	
Time of pick-up by courier		
Tracking number		
Signature		

Disclaimer: KWR Water Research Institute has developed this protocol using the best available knowledge. KWR assumes no responsibility or liability in connection with the use or misuse of this protocol.

Annex 3 Data Policy

Feasibility assessment for an EU-wide Wastewater Monitoring System for SARS-CoV-2 Surveillance: *Data Policy* General Issues

Objectives of the project

An adhoc group formed by:

- European Commission, Joint Research Centre
- European Commission, Directorate-General for Environment,
- the EU Hackathon's winners SEWERS4Covid, namely
 - the Dutch Water Research Institute KWR,
 - Eurecat Technology Centre of Catalonia (Spain),
 - University of Thessaly
 - National Technical University of Athens (Greece)
 - University of Exeter (UK)
 - and the RWTH Aachen University (DE)
- Water Europe
- EurEau

called for participation in an ad-hoc pan-European Feasibility Assessment aiming at exploring the development of a wastewater-based monitoring exercise for SARS-CoV-2 and exchange of experiences in SARS-CoV-2 monitoring in wastewater.

A spontaneous snapshot exercise is taking place employing a previously used EU-wide monitoring mechanism at a selected number of wastewater treatment plants (preferably combined with information about the infection levels in the connected catchment areas). Wastewater surveillance of SARS-CoV-2 eventually combined with the monitoring of pharmaceuticals used in the treatment of COVID-19⁴ is likely to be a valuable and efficient tool to monitor virus circulation in EU cities and towns. Furthermore, it could serve as early warning for re-emergence in Europe and beyond.

Retrieved data form provided samples will be shared as a standard reference to enable the direct comparison between individual research activities that are taking place, thus constituting a Wastewater Monitoring System for SARS-CoV-2.

Participation in this exercise is free of charge and results generated will be exploited jointly.

This includes the organisation of webinar and web-conferences once data are available.

Objectives and scope of the Project Data Policy

The Project Data Policy promotes:

⁴ The list of pharmaceuticals used in the treatment of COVID 19 and eventually analysed in the provided samples has still to be compiled, depending on chemical standard availability on the market and suitability to LC-MS analysis.

- a) transparency and good governance practices in order to enable and facilitate a coordinated and integrated approach for the access and use of provided samples and the retrieved data ;
- b) Implementation the overarching principles of free, full, open and timely access to all kinds of data where possible, whilst recognizing and respecting data ownership and intellectual property rights applicable to such samples and retrieved data.

Definitions

the AdHoc Group is constituted by: European Commission (Joint Research Centre, Directorate-General for Environment), the Dutch Water Research Institute KWR, Eurecat – Technology Centre of Catalonia (Spain), University of Thessaly, National Technical University of Athens (Greece), University of Exeter (UK) and the RWTH Aachen University (DE), Water Europe and EurEau.

<u>Sample owner</u> means the entity that holds the legal ownership of samples, and as such can authorise or deny different level of access to them.

<u>Sample Provider</u> means the entity (nominated by the Sample Owner) in charge of the collection, acquisition, production, management of samples. The Sample Provider may or may not be distinct from the Sample Owner.Roles and Responsibilities

Sample Owners/Sample providers are responsible for making available their samples via the AdHoc Group and for establishing the level of use the AdHoc Group can access.

The AdHoc Group is responsible for making use of the samples and retrieved data according to the level of use defined by Sample Owners/Sample Providers.

Project Participation Form

To be completed by Sample Providers or Sample Owners for making their samples accessible to the AdHoc group at a specific access level.

Purpose of this Form

Using this form, Sample Owners/Sample Providers shall communicate the conditions under which they agree to make their samples and the retrieved data accessible to the AdHoc group.

Sample Owners/Sample Providers are requested to complete one form per provided set of samples.

This form is to be completed by the Sample Owner/Sample Provider and sent by email at: JRC-WATERLAB@ec.europa.eu

General information

Name of the Sampling Site	
Name of the Data Provider organisation	
Contact name	
Telephone	
E-mail	
Name of the Sample Owner organisation (if different from Sample Provider)	

Sample access conditions

Sample Providers/Owners are requested to complete the table below in order to indicate the conditions under which their samples can be made accessible to the AdHoc Group .

Level of sample use to which the AdHoc Group have access		AdHoc Group Accessibility to samples	
		yes	
a)	Sample for RNA measurement only	No	
		Not applicable	
		Yes	
5)	 b) Sample for RNA measurement and chemical analysis of pharmaceuticals used in COVID-19 treatment 	No	
		Not applicable	
c) Sample for chemical analysis of pharmaceuticals used in COVID-19 treatment, only		yes	
		No	
		Not applicable	
d)	Full characterisation	yes	
		No	
		Not applicable	

Table 1 Collected samples in the <u>EU</u> Umbrella study

Annex 4 Collected samples in the <u>EU</u> Umbrella study

Sampling date	Country	Sample Code
25/06/2020	Austria	Austria 1-1
25/06/2020	Austria	Austria 2-1
25/06/2020	Austria	Austria 3-1
17/09/2020	Belgium	
17/09/2020	Belgium	
01/06/2020	Belgium	
27/05/2020	Belgium	Belgium 1-1

Sampling date	Country	Sample Code
02/06/2020	Belgium	Belgium 2-1
17/09/2020	Belgium	Belgium 2-2
01/06/2020	Belgium	
17/09/2020	Belgium	
16/09/2020	Belgium	
16/09/2020	Belgium	
17/09/2020	Bosnia and Herzegovina	Bosnia and Herzegovina 1-2
09/07/2020	Bulgaria	Bulgaria 1-1
17/09/2020	Bulgaria	Bulgaria 1-2
07/07/2020	Bulgaria	Bulgaria 2-1
08/07/2020	Bulgaria	Bulgaria 3-1
08/07/2020	Bulgaria	Bulgaria 4-1
08/07/2020	Bulgaria	Bulgaria 5-1
23/09/2020	Bulgary	Bulgaria 6-1
05/07/2020	Croatia	Croatia 1-1
06/07/2020	Croatia	Croatia 1-1
17/09/2020	Croatia	Croatia 1-2
28/09/2020	Croatia	Croatia 2-2
09/06/2020	Cyprus	Cyprus 1-1
09/06/2020	Cyprus	Cyprus 2-1
17/09/2020	Cyprus	Cyprus 2-2
17/09/2020	Czech Republic	Czech Republic 1-2
16/09/2020	Czech Republic	Czech Republic 2-2
15/09/2020	Czech Republic	Czech Republic 3-2
08/06/2020	Estonia	Estonia 1-1
09/06/2020	Estonia	Estonia 2-1
09/06/2020	Estonia	Estonia 3-1
17/09/2020	Estonia	Estonia 3-2
09/06/2020	Estonia	Estonia 4-1
17/09/2020	Estonia	Estonia 4-2
09/06/2020	Estonia	Estonia 5-1
14/09/2020	Finland	Finland 1-2

Sampling date	Country	Sample Code
13/09/2020	Finland	Finland 2-2
17/09/2020	Finland	Finland 3-2
17/09/2020	France	France 1-2
17/09/2020	France	France 2-2
16/09/2020	France	France 3-2
15/09/2020	France	France 4-2
26/05/2020	Germany	Germany 1-1
15/09/2020	Germany	Germany 1-2
26/05/2020	Germany	Germany 2-1
15/09/2020	Germany	Germany 2-2
17/09/2020	Germany	Germany 3-2
17/09/2020	Germany	Germany 4-2
22/06/2020	Greece	Greece 1-1
17/09/2020	Greece	Greece 1-2
24/06/2020	Greece	Greece 2-1
16/06/2020	Greece	Greece 3-1
10/06/2020	Greece	Greece 4-1
08/06/2020	Greece	Greece 5-1
09/06/2020	Greece	Greece 6-1
16/09/2020	Greece	Greece 6-2
27/05/2020	Greece	Greece 7-1
28/05/2020	Greece	Greece 8-1
17/09/2020	Greece	Greece 8-2
17/09/2020	Hungary	Hungary 1-2
03/07/2020	Ireland	Irland 1-1
22/09/2020	Ireland	Irland 1-2
25/06/2020	Italy	Italy 1-1
25/06/2020	Italy	Italy 2-1
08/05/2020	Italy	Italy 3-1
25/06/2020	Italy	Italy 4-1
17/09/2020	Italy	Italy 4-2
17/09/2020	Italy	Italy 5-2

Sampling date	Country	Sample Code
17/09/2020	Italy	Italy 6-2
22/06/2020	Italy	Italy 7-2
26/05/2020	Latvia	Latvia 1-1
23/09/2020	Latvia	Latvia 1-2
30/09/2020	Lithuania	Lithuania 1-1
14/09/2020	Luxembourg	Luxembourg 1-2
16/09/2020	Luxembourg	Luxembourg 2-2
26/05/2020	Malta	Malta 1-1
29/06/2020	Poland	Poland 1-1
17/09/2020	Poland	Poland 1-2
30/06/2020	Poland	Poland 2-1
25/06/2020	Poland	Poland 3-1
17/09/2020	Poland	Poland 3-2
17/09/2020	Portugal	Portugal 1-2
17/09/2020	Portugal	
17/09/2020	Portugal -	Portugal 2-2
17/09/2020	Romania	Romania 1-2
15/09/2020	Romania	Romania 2-2
22/09/2020	Romania	Romania 3-2
17/09/2020	Slovakia	Slovakia 1-2
17/09/2020	Slovakia	Slovakia 2-2
17/09/2020	Slovakia	Slovakia 3-2
17/09/2020	Slovakia	Slovakia 4-2
06/07/2020	Spain	Spain 1-1
21/09/2020	Spain	Spain 1-2
06/07/2020	Spain	Spain 2-1
06/07/2020	Spain	Spain 3-1
27/05/2020	Spain	Spain 4-1
25/05/2020	Spain	Spain 5-1
17/09/2020	Spain	Spain 5-2
27/05/2020	Spain	Spain 6-1
17/09/2020	Spain	Spain 6-2

Sampling date	Country	Sample Code
06/07/2020	Spain	Spain 7-1
21/09/2020	Spain	Spain 7-2
08/06/2020	Spain	Spain 8-1
17/09/2020	Spain	Spain 8-2
09/06/2020	Sweden	Sweden 1-1
17/09/2020	Sweden	Sweden 1-2
26/05/2020	Sweden	Sweden 2-1
17/09/2020	Sweden	Sweden 2-2
16/09/2020	United Kingdom	UK 1-2
18/09/2020	United Kingdom	UK 2-2
18/09/2020	United Kingdom	UK 3-2
18/09/2020	United Kingdom	UK4-2

Annex 5 Analytical Results – Sewage Sentinel System – Round 1



ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

We renew our thanks for your valuable participation and collaboration in the EU Umbrella Study assessing the feasibility of a SAR5-CoV-2 Sentinel System employing Sewers

As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment.

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene co	ncentration	N2 g0	ne Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi	STD Gene copies per mi	AVG Ct	STD Ct	AVG Ct	STD Ct
02/06/2020	Belgium		49.1	25.5%	3.0%	4.6	3.0	36.8	1.1	nd	nd

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

KWR

Disclaimer: The enclosed analytical measurements have been produced for scientific research purposes, only. Neither the European Commission or KWR assume any responsibility or liability in connection with the use or misuse of these results.





EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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We renew our thanks for your valuable participation and collaboration in the EU Umbrella Study assessing the feasibility of a SARS-CoV-2 Sentinel System employing Sewers

As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment.

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was NOT DETECTABLE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene (concentration	N2 ge	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi	AVG Ct	STD Ct	AVG Ct	STD Ct
27/05/2020	Belgium		49.2	59.3%	2.9%	nd	nd	nd	nd	nd	nd

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511–516; (https://doi.org/10.1021/acs.estlett.0c00357)

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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Commissione suropea, Via Enrico Fermi 2749, 21027 Ispra (VA), ITALIA -Tel. +39 0332 789111





ANALYTICAL REPORT

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment.

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
09/07/2020	Bulgaria		48.7	85.5%	5.6%	63.7	20.3	32.1	0.5	30.2	0.1

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511–516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser) EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Stathinshie Resources Unit D.02 Water and Marine Resources

KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment.

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%	0	N2 gene co	ncentration	N2 gr	me Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per ml		AVG Ct	STD CL	AVG Ct	STD Ct
08/07/2020	Bulgaria		48.7	84.9%	0.9%	26.3	4.1	33.4	0.2	32.0	0.3

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511–516; (https://doi.org/10.1021/acs.estlett.0c00357).

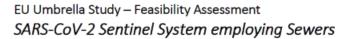
Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

Disclaimer: The enclosed analytical measurements have been produced for scientific research purposes, only. Neither the European Commission or KWR assume any responsibility or liability in connection with the use or misuse of these results.

Commissione suropea, Via Emrico Fermi 2749, 21027 Ispra (VA), ITALLA -Tel. +39 0332 789111 Disclaimer: The enclosed analytical measurements have been produced for scientific research purposes, only. Neither the European Commission or KWR assume any responsibility or liability in connection with the use or misuse of these results.





ANALYTICAL REPORT

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Sampling date				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	ampling site	Processed			AVG Gene					
Sampling date 07/07/2020 B			volume (ml)	AVG	STD	copies per ml	copies per ml	AVG Ct	STD Ct	AVG Ct	STD Ct
			1								
07/07/2020	Bulgaria		49.5	65.8%	9.3%	38.2	3.1	32.8	0.1	31.0	0.0

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511-516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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IOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D.02 Water and Marine Resources

KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

We renew our thanks for your valuable participation and collaboration in the EU Umbrella Study assessing the feasibility of a SARS-CoV-2 Sentinel System employing Sewers

As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment: UWWTP

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	incentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	ampling site	Processed volume (ml)	AVG			STD Gene copies per mi		STD Ct	AVG Ct	STD Ct
08/07/2020	Bulgaria		50.2	105 3%	1.9%	9.4	1.4	24.9	0.3	22.4	0.5

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511-516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

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ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment: UWWTP

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information

Numerical Results

			1	Recovery (%)	N2 gene co	incentration	N2 gr	sne Ot	E_Sarbec	o gene Ct
Sampling da	Country	Sampling site	Processed			AVG Gene	STD Gene				
Sampling Ga	country	Samping are	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			mi	ml				
08/07/200	0 Bulgaria		49.1	64.5%	5.6%	36.0	4.3	32.9	0.1	31.4	0.1

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511–516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

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Disclaimer: The enclosed analytical measurements have been produced for scientific research purposes, only. Neither the European Commission or KWR assume any responsibility or liability in connection with the use or misuse of these results.

Commissione europea, Via Emrico Fermi 2749, 21027 Ispra (VA), ITALLA -Tel. +39 0332 789111 EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D.02 Water and Marine Resources

KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

We renew our thanks for your valuable participation and collaboration in the EU Umbrella Study assessing the feasibility of a SARS-CoV-2 Sentinel System employing Sewers

As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment: UWWTP

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 gr	ene Ot	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene	STD Gene				
Jan gring Gaue	country	Sauthurff are	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			ml	ml				
05/07/2020	Croatia		50.2	68.4%	1.9%	23.3	2.5	33.5	0.1	32.2	0.1
06/07/2020	Croatia		48.8	80.3%	5.6%	18.0	4.6	34.0	0.4	32.3	0.1

Analytical Methods

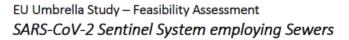
For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511–516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was NOT DETECTED.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Sampling date				Recovery (%)	N2 gene co	ncentration	N2 gr	ne Ct	E_Sarbec	o gene Ct
Sampling date	Country	iampling site	Processed volume (ml)	AVG			STD Gene copies per ml	AVG Ct	STD Ct	AVG Ct	STD Ct
09/06/2020	Cyprus		52.4	55.1%	0.8%	nd	nd	nd	nd	nd	nd

Analytical Methods

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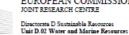
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KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

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Numerical Desults

				Recovery (%)	N2 gene co	ncentration	N2 g	ene Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (mi)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
09/06/2020	Cyprus		54.0	39.5%	3.3%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

Sampling date				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	ampling site	Processed			AVG Gene	STD Gene				
Sampling date 08/06/2020 8	country		volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			ml	mi				
08/06/2020	Estonia		49.0	65.6%	0.8%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	ne Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
09/06/2020	Estonia		55.0	42.9%	4.9%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Γ					Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbec	o gene Ct
	Sampling date	Country	Sampling site	Processed			AVG Gene	STD Gene				
	Sampling date	country	Sauto and	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
- L				(ml)			mi	ml				
[09/06/2020	Estonia		48.3	6.4%	0.0%	0.8	nd	39.8	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	sne Ot	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
09/06/2020	Estonia		47.7	59.8%	5.7%	8.7	0.5	36.1	0.1	35.8	2.3

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	iampling site	Processed volume (ml)	AVG			STD Gene copies per ml	AVG Ct	STD Ct	AVG Ct	STD Ct
09/06/2020	Estonia		49.2	67.3%	1.6%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
26/05/2020	Germany		49.6	25.8%	0.0%	4.5	2.0	36.7	0.7	38.1	nd

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (mi)	AVG		AVG Gene copies per ml			STD Ct	AVG Ct	STD Ct
26/05/2020	Germany		48.0	37.7%	0.6%	1.9	1.0	38.1	0.8	nd	nd

Analytical Methods

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
22/06/2020	Greece		49.5	56.3%	4.6%	5.3	nd	37.7	nd	38.8	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene					
	,		volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			ml	ml				
24/06/2020	Greece		47.4	45.3%	5.5%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Gertian Medema

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			F	Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
08/06/2020	Greece		51.5	51.1%	0.0%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	ampling site	Processed			AVG Gene	STD Gene				
Sampling date	,		volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			mi	mi				
16/06/2020	Greece		49.1	71.4%	7.4%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
10/06/2020	Greece		48.0	83.6%	1.6%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene					
			volume (ml)	AVG	STD	copies per ml	copies per ml	AVG Ct	STD Ct	AVG Ct	STD Ct
09/06/2020	Greece		49.4	53.4%	4.9%	10.8	1.9	35.9	0.3	35.0	1.1

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
27/05/2020	Greece		47.9	56.0%	0.9%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 gr	ne Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
			ping								
28/05/2020	Greece		48.3	54.4%	2.3%	nd	nd	nd	nd	nd	nd

Analytical Methods

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As agreed, we send you herewith the results of RNA SAR5 CoV-2 analysis on the sample provided from your wastewater treatment:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%))	N2 gene co	ncentration	N2 gr	ane Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG			STD Gene copies per ml		STD Ct	AVG Ct	STD Ct
03/07/2020	Ireland		50	72.4%	3.7%	1.0	0.5	38.4	0.8	37.6	1.8

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
25/06/2020	Italy		54.4	98.3%	1.8%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	ine Ot	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD		STD Gene copies per ml		STD Ct	AVG Ct	STD Ct
25/06/2020	Italy		48.8	81.5%	3.7%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene	STD Gene				
Saultanill Gare	country	Saulying site	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			mi	ml				
08/05/2020	Italy		49.4	45.2%	4.4%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was LOW The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
25/06/2020	Italy		49.8	90.5%	9.1%	1.1	0.5	40.2	0.8	nd	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	ne Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene	STD Gene				
Sampling Gave	country	Sampling are	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			mi	ml				
22/06/2020	Italy		44.7	84.7%	13.7%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	ne Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
26/05/2020	Latvia		49.0	57.1%	0.6%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was NOT DETECTED. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 go	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG			STD Gene copies per ml		STD Ct	AVG Ct	STD Ct
26/05/2020	Malta		55.0	40.2%	4.4%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 go	ne Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
29/06/2020	Poland		53.9	53.7%	2.7%	946.2	78.7	29.5	0.1	28.1	0.1

Analytical Methods

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Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 ge	ine Ot	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per ml			STD Ct	AVG Ct	STD Ct
30/06/2020	Poland		50.6	71.1%	0.0%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

I					Recovery (%)	N2 gene co	ncentration	N2 ge	meCt	E_Sarbec	o gene Ct
	Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per ml		AVG Ct	STD Ct	AVG Ct	STD Ct
	25/06/2020	Poland		48.6	54.3%	3.7%	3.3	nd	38.4	nd	nd	nd

Analytical Methods

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The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			1	Recovery (%)	N2 gene co	ncentration	N2 gr	me Ct	E_Sarbeo	o gene Ct
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
06/07/2020	Spain		50.3	63.8%	2.8%	nd	nd	nd	nd	nd	nd

Analytical Methods

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				Recovery (%))	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
06/07/2020	Spain		52.8	65.1%	2.8%	nd	nd	nd	nd	nd	nd

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Numerical Results

Sampling date C			1	Recovery (%)	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
06/07/2020	Spain		51.1	85.5%	7.4%	nd	nd	nd	nd	nd	nd

Analytical Methods

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Numerical Results

Sampling date Co			1	Recovery (%)	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct	
Sampling date	Country	Country Sampling site	Processed			AVG Gene	STD Gene				
Sauthund care	country		volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
27/05/2020 Spain			(ml)			mi	ml				
	Spain		49.3	49.6%	1.8%	nd	nd	nd	nd	nd	nd

Analytical Methods

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In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)	N2 gene co	ncentration	N2 gr	ine Ct	E_Sarbec	o gene Ct
Sampling date	Country	Sampling site	Processed			AVG Gene	STD Gene				
			volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
			(ml)			mi	ml				
25/05/2020	Spain		52.4	32.6%	4.3%	10.4	0.7	35.3	0.1	37.0	nd

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Numerical Results

Sampling date Country			Recovery (%)	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct		
	Country	Country Sampling site	Processed			AVG Gene	STD Gene				
Sauthund gave	country	Sauburg are	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
27/05/2020 Spain			(ml)			mi	ml				
	Spain	ipain 🗾		46.6%	2.6%	2.3	nd	37.6	nd	37.1	nd

Analytical Methods

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Numerical Results

Γ	Sampling date Country			Recovery (%)	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct		
3	Sampling date	Country	Sampling site	Processed volume (ml)	AVG			STD Gene copies per ml	AVG Ct	STD Ct	AVG Ct	STD Ct
[06/07/2020	Spain		50.4	100.7%	0.9%	11.1	6.2	34.8	0.9	34.2	0.9

Analytical Methods

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We renew our thanks for your valuable participation and collaboration in the EU Umbrella Study assessing the feasibility of a SARS-CoV-2 Sentinel System employing Sewers

As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

I	Sampling date Country S			Recovery (%))	N2 gene co	ncentration	N2 ge	ne Ct	E_Sarbec	o gene Ct	
		ampling site	Processed			AVG Gene	STD Gene					
	sampling care	country	.)	volume	AVG	STD	copies per	copies per	AVG Ct	STD Ct	AVG Ct	STD Ct
l				(mi)			mi	mi				
	08/06/2020 Spain	Spain	49.3	63.8%	0.0%	1.2	nd	39.2	nd	nd	nd	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Sampling date (1	Recovery (%))	N2 gene co	ncentration	N2 gene Ct		E_Sarbeco gene Ct	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG		AVG Gene copies per mi			STD Ct	AVG Ct	STD Ct
09/06/2020	Sweden		47.9	56.9%	1.6%	66.9	0.0	33.2	0.1	30.9	0.1

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

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KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Sampling date Country		1	Recovery (%)	N2 gene co	ncentration	N2 84	ine Ct	E_Sarbec	o gene Ct	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi		AVG Ct	STD Ct	AVG Ct	STD Ct
26/05/2020	Sweden		47.7	35.2%	0.8%	346.0	1.0	30.0	0.0	29.1	0.0

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

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Annex 6 Analytical Results – Sewage Sentinel System – Round 2











KWR

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Belgium		55.4	32.6%	0.7%	95.7	7.7	
	N	2 gene Ct	E_Sarbeco gene Ct		CrA	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	31.6	0.1	29.7	0.1	8.30E+04	0.00E+00	1.15E-03	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

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(EC - Coordinator EU Umbrella Study)	(KWR Head of Laboratory and Co-organiser)

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		-		Recovery (%)	-	N2 gene concentrati	on
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml
14/09/2020	Belgium		47.5	44.7%	2.1%	65.3	8.9
	N2 gene Ct		E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	32.5	0.2	30.9	0.1	4.40E+04	3.28E+03	1.48E-03

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		-		Recovery (%)		N2 gene conce	ntration
Sampling date	Country	Sampling site	Processed volume (ml)	BVA	STD	AVG Gene copies per ml	STD Gene copies per ml
14/09/2020	Belgium		48.6	47.2%	1.4%	4.9	1.2
	N2 gene Ct		E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage
	AVG Ct	AVG Ct STD Ct		STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	36.2	0.3	34.0	0.8	1.32E+04	5.82E+02	3.75E-04

Analytical Methods

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KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sempling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Bosnia and Herzegovina		49	56.7%	5.0%	9.0	1.2	
	N2 gene Ct		E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	35.3	0.1	33.3	0.2	7.35E+03	5.77E+02	1.22E-03	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Bulgaria	l	49	47.2%	0.0%	67.3	8.7	
	N2 gene Ct		E_Sarbe	co gene Ct	6	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	32.4	0.2	30.2	0.1	4.696+04	2.89E+03	1.43E-03	

Analytical Methods

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EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D 02 Water and Marine Resources

KWR

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
23/09/2020	Bulgaria		49.4	43.5%	3.4%	33.8	5.4	
	N2 gene Ct		E_Sarbeco gene Ct		CrA	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	33.2	0.2	30.8	0.1	5.47E+04	2.86E+03	6.19E-04	

Analytical Methods

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ANALYTICAL REPORT

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment plant:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration	n
Sampling date	Country	Sempling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml
28/09/2020	Croatia		49.9	33.0%	2.0%	22.8	7.4
	N2 (N2 gene Ct E		E_Sarbeco gene Ct		CrAssphage concentration	N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	33.8	0.5	31.7	0.1	6.81E+04	0.00E+00	3.35E-04

Analytical Methods

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EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sempling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Croatia		51.8	35.4%	2.7%	13.5	2.2	
	N2 gene Ct		E_Sarbeco gene Ct			CrAssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.4	0.3	32.8	0.5	6.18E+04	0.00E+00	2.195-04	

Analytical Methods

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ANALYTICAL REPORT

SARS-CoV-2 Sentinel System employing Sewers.

In this specific case, the viral load was LOW.

Sampling site

STD Ct

0.2

516; (https://doi.org/10.1021/acs.estlett.0c00357).

(EC - Coordinator EU Umbrella Study)

TO WHOM IT MAY CONCERN

pertinent QA/QC evaluations.

Country

Cyprus

AVG Ct

37.7

N2 gene Ct

treatment plant:

Numerical Results

Sampling date

06/10/2020

Analytical Methods

Yours sincerely

Bernd M. Gawlik

EU Umbrella Study – Feasibility Assessment

SARS-CoV-2 Sentinel System employing Sewers

The interpretation of the findings requires the necessary provision of additional information.

Processed

volume (ml)

48.1

AVG Ct

nd

E_Sarbeco gene Ct

Recovery

(95)

AVG

48.8

STD Ct

nd

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the

STD

nd.

AVG Gene

copies per mi

6.29E+04

Gertjan Medema

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511-

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N2 gene concentration

AVG Gene copies per ml

STD Gene copies per mi

2.06E+02

(KWR Head of Laboratory and Co-organiser)

CrAssphage concentration

STD Gene

copies per m

0.3

N2/CrAssphage

AVG Gene

copies per

human fecal waste water

3.17E-05

EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D 02 Water and Marine Resources



EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

ANALYTICAL REPORT

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Belgium		48.5	55.2%	0.0%	2.4	0.2	
	N2 gene Ct		E_Sarbe	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	37.4	0.1	35.9	nd	1.59E+04	2.92E+02	1.49E-04	

Analytical Methods

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was Not Detected.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		_		Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Cyprus		49	21.6%	0.7%	nd	nd	
	N2	N2 gene Ct E		o gene Ct	0	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	nd	nd	nd	nd	1.78E+05	1.44E+04	#VALUE!	

Analytical Methods

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JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D.02 Water and Marine Resources

KWR

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG STD		AVG Gene copies per ml	STD Gene copies per ml	
14/09/2020	Czech Republic	ch Republic		33.0%	0.7%	152.7	25.9	
	N2 gene Ct		E_Sarbec	beco gene Ct CrA		ssphage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	31.0	0.3	29.1	0.0	9.98E+04	8.64E+03	1.53E-03	

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Czech Republic		53.9	7.6%	0.7%	1.7	0.3	
	N2 gene Ct		E_Sarbe	E_Sarbeco gene Ct		GrAssphage concentration		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	37.4	0.2	35.2	0.1	1.99E+04	1.845+03	8.41E-05	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

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SARS-CoV-2 Sentinel System employing Sewers

EUROPEAN COMMISSION

Unit D.02 Water and Marine Resources

JOINT RESEARCH CENTRE

Directorate D Sustainable Resources

ANALYTICAL REPORT

TO WHOM IT MAY CONCERN

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment plant:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
14/09/2020	Czech Republic		53.2	46.7%	2.1%	90.2	5.3	
	N2 gene Ct		E_Sarbeco gene Ct C		CrAssp	hage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	31.8	0.1	29.7	0.0	5.45E+04	2.66E+03	1.66E-03	

Analytical Methods

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In this specific case, the viral load was Not Detected.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed AVG volume (ml)		STD	AVG Gene copies per ml	STD Gene copies per ml	
14/09/2020	Estonia	l	48.9	13.6%	0.7%	nd	nd	
	N2 gene Ct		E_Sarbeco	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	nd	nd	nd	nd	1.31E+04	0.00E+00	na	

Analytical Methods

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KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Estonia		48.6	51.7%	2.1%	5.1	2.2	
	N2 gene Ct		E_Sarbed	beco gene Ct		rAssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	36.3	0.6	34.6	0.3	3.74E+04	0.00E+00	1.35E-04	

Analytical Methods

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Numerical Results

		_		Recovery (%)		N2 gene concentration		
Sampling date	Country	Sempling site	Processed volume (mi)	BVA	STD	AVG Gene copies per mi	STD Gene copies per ml	
13/09/2020	Finland		49.9	18.6%	0.7%	1.7	1.6	
	N2 gene Ct		E_Sarbeco gene Ct		CrA	CrAssphage concentration		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	38.3	1.8	35.1	1.0	4.81E+04	0.00E+00	3.46E-05	

Analytical Methods

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EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D.02 Water and Marine Resources

KWR

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Samplingsite	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
13/09/2020	Finland	١	51.4	31.1%	1.4%	2.7	0.9	
	N	12 gene Ct	E_Sarbeco gene Ct		CrAs	sphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	37.1	0.5	37.3	nd	5.25E+04	8.25E+03	5.19E-05	

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In this specific case, the viral load was Not Detected.

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
13/09/2020	Finland		47.9	62.3%	2.8%	nd	nd	
	N2 gene Ct		E_Sarbeco	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	nd	nd	nd	nd	9.60E+02	0.00E+00	#VALUE!	

Analytical Methods

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KWR

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In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Countr y	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
16/09/202 0	France	١	48.6	47.8%	1.4%	45.3	5.8	
	N2 gene Ct		E_Sarbeco	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	32.7	0.1	30.4	0.2	6.79E+04	8.73E+03	6.67E-04	

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The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
16/09/2020	France	l	49	39.7%	3.6%	112.2	2.9	
	N2 (ene Ct	E_Sarbeco gene Ct		CrAssphage of	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	31.6	0.1	29.6	0.2	4.69E+04	2.89E+03	2.39E-03	

Analytical Methods

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KWR

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In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		-		Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	volume AVG STD		AVG Gene copies per mi	STD Gene copies per ml	
15/09/2020	France		49.5	54.7%	3.6%	54.5	2.9	
	N2 gene Ct AVG Ct STD Ct 32.5 0.0		E_Sarbe	E_Sarbeco gene Ct		Assphage concentration	N2/CrAssphage	
			AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
			30.2	0.0	6.06E+04	0.00E+00	9.00E-04	

Analytical Methods

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In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	France		51.1	41.6%	3.4%	64.6	2.8	
		N2 gene Ct		E_Sarbeco gene Ct		oncentration	N2/CrAssphage	
	AVG Ct	AVG Ct STD Ct		STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	32.2	32.2 0.1		0.0	8.02E+04	8.30E+03	8.05E-04	

Analytical Methods

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In this specific case, the viral load was MODERATE.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

Campling	ampling date Country	Sampling site	Recovery (%)			N2 gene concentration		
			Processed volume (ml)	AVG	STD	AVG Gene copies per mi	STD Gene copies per ml	
15/09/2020	Germany		49.3	26.8%	2.7%	25.2	0.6	
	N2 gene Ct		E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	33.6	0.0	31.1	0.1	1.03E+05	2.87E+03	2.43E-04	

Analytical Methods

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Numerical Results

				Recovery (%)		N2 gene concentration	
Sampling date	Country Sampling site		Sampling site Processed AV		STD	AVG Gene copies per ml	STD Gene copies per ml
12/10/2020	Germany		50.1	38.9	nd	87.9	4.0
	N2 gene Ct		E_Sarbeco gene Ct		Cr.4	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	31.8	0.1	29.6	0.1	9.60E+04	2.63E+03	9.16E-04

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Germany		52.1	26.8%	1.4%	2.9	1.0	
	N2 gene Ct		E_Sarbeco gene Ct		GrAs	sphage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	36.7	0.5	34.5	0.0	1.23E+05	5.43E+03	2.38E-05	

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Sampling date	Country	Sampli	Sampling site		ery (%)	N2 gene concentration	
			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml
9/17/2020	Germany		54.1	17.6%	0.7%	3.5	3.4
	N2 gene Ct		E_Sarbec	o gene Ct	CrAssphage concentration		N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	37.1	1.8	33.9	0.2	1.22E+05	5.23E+03	2.86E-05

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Numerical Results

Sampling date	Country	Sampling site		Recovery (%)	N2 gene concentration		
			Processed volume (ml)	EVA	STD	AVG Gene copies per ml	STD Gene copies per ml
9/17/2020	Germany		48.2	43.2%	1.4%	15.4	2.3
	N2 gene Ct		E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per mi	STD Gene copies per mi	AVG Gene copies per human fecal waste water
	34.6	0.2	32.2	0.1	4.77E+04	2.93E+03	3.22E-04

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ANALYTICAL REPORT

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		Sampling site	Recovery (%)			N2 gene concentration		
Sampling date	Country		Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Greece		49.3	34.1%	4.3%	37.1	3.7	
	N2 ge	N2 gene Ct		E_Sarbeco gene Ct		ssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	33.2	0.1	31.6	0.2	1.12E+05	2.87E+03	3.33E-04	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

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EUROPEAN COMMISSION JOINT RESEARCH CENTRE Directorate D Sustainable Resources Unit D.02 Water and Marine Resources

KWR

EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

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Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi	
16/09/2020	Greece	I	48.8	44.5%	3.4%	2.0	0.9	
	N2 ge	ene Ct	E_Sarbeco gene Ct		Cr/	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	37.4	0.7	37.7	0.4	9.02E+04	1.74E+04	2.18E-05	

Analytical Methods

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Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Greece		49.3	50.2%	1.4%	2.2	0.8	
	N2 gene Ct		E_Sarbeco gene Ct		CrA	ssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	37.5	0.6	35.0	1.0	9.74E+04	1.15E+04	2.27E-05	

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Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Hungary		53.4	37.8%	2.0%	48.7	5.3	
	N2 gt	ene Ct	E_Sarbeco gene Ct		CrAssphage concentration		N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	32.5	0.1	30.5	0.1	3.18E+04	5.83E+03	1.536-03	

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
22/09/2020	Ireland	Ireland		37.3%	4.1%	22.4	9.2	
	N2 ge	ene Ct	E_Sarbeco gene Ct			Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mI	AVG Gene copies per human fecal waste water	
	33.8	0.6	31.3	0.1	8.13E+04	0.00E+00	2.75E-04	

Analytical Methods

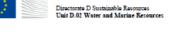
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EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

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Numerical Results

			Recovery (%)			N2 gene concentration	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi
17/09/2020	Italy		51.6	38.7%	0.7%	4.6	1.8
	N2 ge	ene Ct	E_Sarbec	o gene Ct	0	Assphage concentration	N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water
	36.3	0.6	33.5	nd	2.83E+04	5.48E+02	1.61E-04

Analytical Methods

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Italy		51.8	59.2%	4.3%	5.0	2.2	
	N2 ge	ene Ct	E_Sarbeco gene Ct		OrA	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	36.2	0.7	34.9	1.1	1.80E+04	1.91E+03	2.78E-04	

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Numerical Results

Humber icur wes									
				Recovery (%)		N2 gene concentrat	N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (mi)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml		
17/09/2020	Italy		54.0 51.1% 3.4%		3.4%	2.0	2.1		
	N2 ge	ine Ct	E_Sarbeco gene Ct		GrAssphage concentration		N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water		
	37.8	2.1	33.7	0.4	1.35E+04	7.86E+02	1.455-04		

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Numerical Results

ſ					Recovery (%)		N2 gene concentration		
	Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
[23/09/2020	Latvia		54.8	4.8 3.0% 0.5%		nd	nd	
		N2	gene Ct	E_Sarbei	co gene Ct	CrA	N2/CrAssphage		
		AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
		nd	nd	nd	nd	4.20E+03	2.58E+02	nd	

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

			Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi	STD Gene copies per ml	
30/09/2020	Lithuania		48.0	42.5%	4.7%	13	nd	
	N2 ge	ene Ct	E_Sarbec	o gene Ct	CrA	CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	37.9	nd	36.5	1.8	1.29E+04	5.89E+02	1.00E-04	

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				Recovery (%)		N2 gene o	oncentration		
Sampling date	Country	Sampling site	Processe d volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml		
14/09/2020	Luxembourg	۱	50.0	22.5%	2.0%	8.4	1.1		
15/09/2020	Luxembourg		49.7	19.1%	0.0%	10.5	1.7		
							CrAssp	hase	
			N2	gene Ct	E_Sarbe	co gene Ct	concerr		N2/CrAssphage
			AVG Ct	stD Ct	E_Sarbe AVG Ct	STD Ct			N2/CrAssphage AVG Gene copies per human fecal waste water
14/09/2020	Luxembourg	-			AVG	-	Concen AVG Gene copies per	STD Gene copies	AVG Gene copies per human fecal

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Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Country Sampling site		AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
16/09/2020	Luxembourg		50.2	41.1%	1.495	3.7	0.5	
	N	2 gene Ct	E_Sarbec	o gene Ct	CrAss	phage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	36.4	0.2	34.0	0.3	3.29E+04	5.92E+03	1.12E-04	

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				Recovery (%)		N2 gene concen	tration	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
15/09/2020	Luxembourg		50.0	19.6%	0.7%	17.4	5.9	
	N2 gene Ct		E_Sarbeco gene Ct		CrAss	CrAssphage concentration		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.2	0.5	31.9	0.3	9.20E+04	0.00E+00	1.89E-04	

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Numerical Results

		Sampling		Recovery (%)		N2 gene co	ncentration
Sampling date	Country	site	Processed volume (ml)			AVG Gene copies per ml	STD Gene copies per ml
17/09/2020	Poland	I	48.4	18.1%	2.8%	22.7	0.6
	N2 g	ene Ct	E_Sarbeco	gene Ot	CrAsspha	e concentration	N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	34.0	0.1	31.8	0.1	4.96E+04	5.84E+03	4.58E-04

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Numerical Results

				Recovery (%)		N2 gene concentration	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	जाव	AVG Gene copies per ml	STD Gene copies per ml
17/09/2020	Poland	I	49.6	15.6%	0.7%	14.1	4.0
	N2 gr	ene Ct	E_Sarbec	E_Sarbeco gene Ct		CrAssphage concentration	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water
	34.7 0.5		31.9	0.4	9.88E+04	2.85E+03	1.43E-04

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

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EU Umbrella Study – Feasibility Assessment SARS-CoV-2 Sentinel System employing Sewers

EUROPEAN COMMISSION

Unit D.02 Water and Marine Resources

JOINT RESEARCH CENTRE

Directorate D Sustainable Resources

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As agreed, we send you herewith the results of RNA SARS CoV-2 analysis on the sample provided from your wastewater treatment plant:

The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was MODERATE. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		Constant	Recovery (%)			N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Portugal -	١	55.8	27.9%	0.7%	21.9	5.6	
	N2 ge	ene Ct	E_Sarbec	o gene Ct	OrA	ssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	33.8	0.4	32.0	0.0	5.73E+04	1.01E+04	3.81E-04	

Analytical Methods

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		Sempling site	Recovery (%)			N2 gene concentration		
Sampling date	Country		Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Portugal		49.8	24.6%	0.7%	136.5	0.0	
	N2 gene Ct		E_Sarbeco gene Ct		CrA	ssphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	31.2	0.0	29.1	0.0	7.63E+04	5.68E+03	1.79E-03	

Analytical Methods

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was Not Detected. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene o	N2 gene concentration		
Sampling date	Country Sampling site		Processe d volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml		
15/09/202 0	Portugal	Portugal		53.6 0.1%		nd	nd		
		N2 gene Ct	E_Sarbe	co gene Ct	1	sphage ntration	N2/CrAssphag e		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water		
							maste mater		

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In this specific case, the viral load was LOW.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
22/09/2020	Romania		51.8	48.3%	2.0%	0.8	nd	
	N	2 gene Ct	E_Sarbec	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	38.4	nd	36.2	36.2 1.4		1.91E+03	1.335-04	

Analytical Methods

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was HIGH. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

	Country	Sampling site	Recovery (%)			N2 gene concentration		
Sampling date			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi	
15/09/2020	Romania	ļ	55.4	52.6%	0.0%	84.8	7.7	
	N2 g	gene Ct	E_Sarbec	o gene Ct	OrA	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water	
	31.7	0.1	29.6	0.1	3.79E+04	2.55E+03	2.24E-03	

Analytical Methods

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In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information

Numerical Results

	Country	Sampling site	Recovery (%)			N2 gene concentration		
Sampling date			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Romania	ŀ	49.4	51.0%	1.4%	50.6	2.9	
	N	12 gene Ct	E_Sarbec	E_Sarbeco gene Ct		CrAssphage concentration		
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	32.8	0.1	30.7	0.2	3.04E+04	0.00E+00	1.67E-03	

Analytical Methods

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The results have been obtained in the premises of KWR, the Dutch Water Research Institute. Data are enclosed, with the pertinent QA/QC evaluations.

In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Slovakia		50.3	18.6%	4.2%	10.5	0.8	
	N2 ge	ene Ct	E_Sarbec	o gene Ct	C7	CrAssphage concentration		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	35.1	0.1	33.3	0.5	4.17E+04	2.81E+03	2.52E-04	

Analytical Methods

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In this specific case, the viral load was MODERATE.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

		Sampling site	Recovery (%)			N2 gene concentration		
Sampling date	Country		Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Slovakia	I.	48.9	34.8%	0.7%	18.0	1.2	
	N2 ge	ne Ct	E_Sarbec	o gene Ct	CrA	ssphage concentration	N2/OrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.3	0.1	32.6	0.2	6.548+04	0.00E+00	2.75E-04	

Analytical Methods

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The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

	Country	Sempling site	Recovery (%)			N2 gene concentration		
Sampling date			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi	
17/09/2020	Slovenia		48.3	25.1%	1.495	27.1	5.6	
	N2	gene Ct	E_Sarbec	o gene Ct	c	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	33.7	0.3	32.2	0.1	8.07E+04	2.93E+03	3.36E-04	

Analytical Methods

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The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

	Country	Sampling site	Recovery (%)			N2 gene concentration		
Sampling date			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Slovenia		49.0	24.1%	1.4%	26.3	4.9	
	N2 ge	ine Ct	E_Sarbec	o gene Ct	Cr/	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	33.7	0.3	31.8	31.8 0.3		2.89E+03	3.31E-04	

Analytical Methods

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
21/09/2020	Spein		49.8	49.2%	0.7%	16.5	4.0	
		N2 gene Ct	E_Sarbec	o gene Ct	CrAss	phage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.3	0.4	32.6	0.4	2.35E+04	5.40E+03	7.01E-04	

Analytical Methods

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In this specific case, the viral load was HIGH.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per mi	STD Gene copies per ml	
17/09/2020	Spain		49.8	49.8 15.7%		174.7	25.6	
	N2 gene Ct		E_Sarbeco gene Ct		Cn	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	30.9	0.2	29.2	0.1	7.83E+04	2.84E+03	2.23E-03	

Analytical Methods

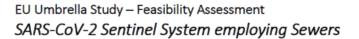
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Numerical Results

	Country	Sampling site	Recovery (%)			N2 gene concentration		
Sampling date			Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Spain		48.6	51.0%	2.8%	49.4	5.8	
	N2 ge	ene Ct	E_Sarbec	o gene Ct	Cn	Assphage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	32.8	0.1	31.3	0.2	6.38E+04	2.91E+03	7.74E-04	

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In this specific case, the viral load was LOW.

The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentra	tion	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
21/09/2020	Spein		47.3	54.5%	1.4%	17.3	0.6	
	N2	gene Ct	E_Sarbec	o gene Ct	Cr/	Assphage concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.2 0.1	31.7	0.4	2.35E+04	8.97E+02	7.39E-04		

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In this specific case, the viral load was LOW. The interpretation of the findings requires the necessary provision of additional information.

Numerical Results

				Recovery (%)		N2 gene concentra	tion	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi	
17/09/2020	Spain		49.6	54.7%	0.7%	14.3	0.3	
	N2 gene Ct	ene Ct	E_Sarbec	o gene Ct	Cn	Assphage concentration	N2/CrAssphage	
	AVG Ct	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per mi	AVG Gene copies per human fecal waste water
	34.6	0.0	32.5	0.2	5.85E+04	2.85E+03	2.45E-04	

Analytical Methods

For details regarding the analytical method used, please refer to Medema et al, Environ. Sci. Technol. Lett. 2020, 7, 7, 511– 516; (https://doi.org/10.1021/acs.estlett.0c00357).

Yours sincerely

Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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Numerical Results

				Recovery (%)		N2 gene concentre	ation			
Sampling date	Country	Sempling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi			
17/09/2020	Sweden		49.5	37.7%	0.7%	19.4	8.6			
	N2 ge	ene Ct	E_Sarbec	o gene Ct	0	rAssphage concentration	N2/CrAssphage			
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water			
	34.2 0.7 32.2 0.1 4.85E					0.00E+00	4.00E-04			

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Numerical Results

				Recovery (%)		N2 gene	concentration	
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml	
17/09/2020	Sweden		51.2	27.0%	0.7%	18.4	11	
	1	N2 gene Ct	E_Sarbec	o gene Ct	CrAssphage o	concentration	N2/CrAssphage	
	AVG Ct STD Ct		AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
	34.2	0.1	32.0	0.1	6.25E+04	5.52E+03	2.946-04	

Analytical Methods

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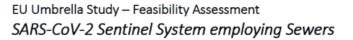
Bernd M. Gawlik (EC - Coordinator EU Umbrella Study) Gertjan Medema (KWR Head of Laboratory and Co-organiser)

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Numerical Results

				Recovery (%)		N2 gene concentre	ition
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per mi
18/09/2020	United Kingdom		48.6	43.5%	3.4%	0.7	nd
	N2 gen	e Ct	E_Sarbec	o gene Ct	C	Assphage concentration	N2/CrAssphage
	AVG Ct STD Ct 38.7 nd	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water	
		35.7	2.1	9.47E+04	5.82E+03	7.83E-06	

Analytical Methods

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Numerical Results

				Recovery (%)		N2 gene concent	tration		
Sampling date	Country	Sampling site	Processed volume (ml)	AVG	STD	AVG Gene copies per ml	STD Gene copies per ml		
16/09/2020	United Kingdom		51.2	37.3%	5.4%	10.0	1.4		
	N2 gen	e Ct	E_Sarbec	o gene Ct	CrAss	phage concentration	N2/CrAssphage		
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water		
	34.9	0.2	33.3	0.3	4.20E+04	6.91E+03	2.37E-04		

Analytical Methods

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Numerical Results

				Recovery (%)		N2 ge	ne concentration
Sampling date	Country	site		AVG	STD	AVG Gene copies per ml	STD Gene copies per ml
18/09/2020	United Kingdom	ļ	48.3	19.1%	2.7%	47.6	14.6
	N2 gen	e Ct	E_Sarbec	o gene Ct	CrAssphage o	concentration	N2/CrAssphage
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	STD Gene copies per ml	AVG Gene copies per human fecal waste water
	32.7	0.4	30.6	0.2	4.04E+04	1.46E+03	1.18E-03

Analytical Methods

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Numerical Results

				Recovery (%)		N2 gene concent	tration	
Sampling date	Kingdom	Sampling site	Processed volume (ml)	AVG	ято	AVG Gene copies per ml	STD Gene copies per ml	
18/09/2020		_	49.7	37.8%	3.4%	46.3	2.8	
	Kingdom	N2 gene Ct		E Sarbec	o sece Ct	0.1.0		
	the Berry		e_served	o Bene or	UTHOS	phage concentration	N2/CrAssphage	
	AVG Ct	STD Ct	AVG Ct	STD Ct	AVG Gene copies per ml	stD Gene copies per mi	AVG Gene copies per human fecal waste water	

Analytical Methods

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Annex 7 Compilation of input received on EU Survey on Methodologies

SAMPLING	Quest 1	Quest 3	Quest 4	Quest 5	Quest 6	Quest 7	Quest 8	Quest 9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
 Point(s) of sampling inside WWTP 	untreated influent	entry WWTP	Inlet, fine screens, WWTP	1	1	1	1	1	1 (3)	Inlet, before treatment	Influent before any treatment			1	At entrance	2 point	0	3 (5)	3 (5)
2. Volume of samples	45 ml	8 x 50 мл	340 ml	1000 mL	1000 mL	1000 mL	1000 mL	1000 mL	1000	250 to 500 mL	500 mL	Between 3000- 5000 mL	100	500 mL	1L	1L	500	1L	1L
3. Type of samples (grab/composite)	24 h composite	composite	composite samples	24-hour composite	24-hour composite	24-hour composite	24-hour composite	24-hour composite	composite	composite 24 hours	24 h composite	except 2 hospitals	composite 24 h	grab/composit e	both	Grab and composite	both	Composite	Composite
4. Type of autosampler used	cooled	PP2002+	HACH, BUHLER BL4011 Inlet	Automatic composite autosampler	Automatic composite autosampler	Automatic composite autosampler	Automatic composite autosampler	Automatic composite autosampler		,,,,	Automatic autosampler	Automatic		not specified	Time- proportional	Autosampler AS90 Hach	ISCO 3700		
5. Flow-proportional or time-proportional samples?	flow proportional	proportiona I I samples	proportional of time	Flow- proportional	Flow- proportional	Flow- proportional	Flow- proportional	proportional or time-		time proportional	flow proportional	proportional samples		16 subsamples	Time- proportional	proporcional samples	Time- proportional	Time proportional	Time proportional
6. Time interval of flow into autosampler		1 hour	every 6 minutes	100 mL every 100 m ³	Depending on WWTP		24 hours	3800 m3	Every hour (24 samplings)		15 min	Sampling 9am- 9pm	1 hour	1 hour	one hour	one hour			
7. Time of start of sampling (on average)		9,15 AM	July 8, 2020	8:00 AM	7 am on Sunday	///	8:00 AN	1 10 a.m.		8:00 AM	8	samples at 8:00, grab	09:00						
8. Time of end of sampling (on average)		9,15 AM	July 9, 2020	7:00 AM	7 am on Monday		8:00 AN	1 9 a.m.		12:00 AM	14	samples at 15:00	08:00						
9. Time of sample collection (on average)		24 часа	24 hour	8:00 AM	24h	///	40 min			4 hours	6	8:00 hours	09:00	24 hours	24 hours				
10. Type of sample storage container	cooled at 4°C +- 3°C	plastic bottle at sampler		Sterile polyethylene bottles	Sterile polyethylene bottles	Sterile polyethylene bottles	Sterile polyethylene bottles	Sterile polyethylene bottles		Poliethlene bottle with secure seal	Plastic inert polymer	1 reservoir		water sampling bottles	1L plastic bottle	HDPE sterile	PE	1 L sterile plastic container	1 L sterile plastic container
11. Conditions of collected sample storage	cooled at 4°C +- 3°C	in the refrigerator	6°C	Fridge (4 °C)	Celsius refridgerated	-20 °C	frozen (-20°C)	Refrigerated (4 ºC)		waters are collected in		temperatura < 10 ºC	4-10 Celsius	Refrigerated	Refrigerated				
12. Time of sample delivery to the laboratory (on average)	1-7 days	5 min	5 min	11:00 AM	within 24 hours	24 h	15-30 days	Bellow 8H	30 min to 2 hours	6-24 hours	3-6h	< 8 hour	15 min	6 hours	6 hours				
 Conditions of transport to the laboratory (e.g. dry ice, melting ice etc.) 	frozen cooling packs			Ice packs inside cooler box	cool box with cool boys	frozen gel packs (frozen if to be shipped to distant		Refrigerated (4 °C)	Frozen in cold bag.	4 °C with ice packs	Refrigerated	dry ice, temperatura between 2 and 8 ºC	Refrigerated	refrigerated, melting ice	refrigerated, melting ice				
14. Do you document the following?																			
14a. Average inflow temperature on day of sampling	yes		21,7°C	Yes	Yes	Yes	Yes	Yes	yes		yes	No		NO	Yes	yes	YES	Yes	Yes
14b. Average inflow COD concentration	yes		264 mg/l	Yes	Yes	Yes	Yes	Yes	yes		yes	Yes (on a weekly basis)		NO	Yes	yes	YES	Yes	Yes
14c. Total inflow nitrogen (N) concentration	yes		27,6 mg/l	Yes	Yes	Yes	Yes	Yes	yes		yes	Yes (on a weekly basis)		NO	Yes	yes	YES	No	No
14d. Total inflow suspended solids concentration	yes		67,0 mg/l	Yes	Yes	Yes	Yes	Yes	yes		yes	Yes (on a weekly basis)		NO	Yes	yes	YES	Yes	Yes
14e. Total inflow BOD concentration	no		100 mg/l	No	No	No	No	Yes	yes		yes	Yes (on a weekly basis)		NO	No	yes	YES	Yes	Yes

SAI	MPLE Preparation	Quest 1	NOTES/CO MMENTS	Quest 5-9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
15.	Day(s) after sampling when sample prep iniates (on average)	4		0	2	1	15-30	Same day	between few days	One day	Same day	1 day	1	0 days	0 days
<mark>16</mark> .	Volume of concentrated sample (mL)	800 µl	we resuspent a	200 mL	70	250 mL	80 mL	1000	100ml	200 mL	200 mL	200 mL	200	200	100
17.	Number of sample replicates	3		2	1	1	2	1	1	One	2	3 replicates	1	1	1
18.	Brief description of method of sample concentration	inactivation at 60°C		Centricon Plus-70	KWR SOP with 10 kDA	WHO Polio surveillance		Hollow fiber filter + PEG	centricon 100 10 kDa	Aluminium floculation-		Aluminium- hidroxide	Centrifugati on +		Glycine+ beef extract
<mark>19</mark> .	Use of internal standard (if yes, which one)?		construction		Yes, mengovirus		not yet	Porcine CoV	Pepper mild mottle virus		Mengovirus	Yes,we use mengovirus	NO		Not yet
<mark>20.</mark>	Conditions of storage of concentrated samples	· ·	freezing at - 80°C or RNA			-20 °C	frozen (- 20°C)	if not processed	-80	4 or -80 °C		1-5 ºC	-20 Celsius	-20ºC	-20ºC

RN	A EXTRACTION	Quest 1	Quest 5-9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
21.	Day(s) after sampling when RNA extraction starts (on average)	0	1	3	2	30-40	0	Same day as	2 days	Same day	1 day	1	1	1
22.	Name of RNA extraction kit or reagents	Monarch RNA	Quick- DNA/RNA™	Chemagic Viral300	MiniMag or eGeneUP	QIAamp viral RNA	QIAamp Fast DNA	QIAamp virus RNA	NucleoSpin RNA virus	NucleoSpin RNA virus		ThermoFish er PureLink		MagNaPure LC total
23.	Steps of RNA extraction	5	Sample preparation,	According to	lysis with	following manufactur	6	Lysis- Bidning to	10		5	Lysis - Binding -	8	6
24.	Final eluted RNA volume (µL)	40 µl	50 μL	50	100	60	100	70 ul	100 µL	50 μL	50	20	50	100
25.	Number of RNA extraction replicates	1 per sample	3	1	1	1		1	one	2	1	1	1	1
26.	Use of internal standard (if yes, which one)?		Yes, OC43 Coronavirus	No	no	not yet	MNV	Luciferase control RNA	no	Yes	YES, positive	NO	No	yes Equine Artritis
27.	Final RNA concentration (ng/µL)	10-100			///	to be evaluated	depends on sample		not checked			NA	not analysed	not analysed

SARS-CoV-2 QUANTIFICATION	Quest 1	Quest 5-8	Quest 9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
28. Day(s) after sampling when quantification	43831	1	1	3	3	30-40	0 - 1	next day to RNA	3 to 5 days	Same day	1-4 day	1	1 or 2	2
29. qPCR or sequencing analyses?	qPCR	qPCR	qPCR	qPCR	both (nested RT-	RT-qPCR	qPCR	qPCR and ddPCR	qPCR	RTgPCR	qPCR	qPCR	qPCR	qPCR
30. One-Step or Two-Step RT-qPCR?	One-Step	One-Step RT-qPCR	One-Step RT-qPCR	One-Step	one-step for qPCR, two-		One-Step	one step	One step	One Step	One-Step	One-Step RT-qPCR	one step RT- qPCR	one step RT- qPCR
31. Type of qPCR instrument	Rotor-gene Q (Qiagen)	QuantStudi o (Applied		QuantStudio	QuantStudi o 12K Flex		Applied Biosystems		Light Cycler 480 (Roche)	Applied biosystems	One-Step	Applied Biosistems	ABI 7500	LightCycler 96
32. qPCR kit (One-Step or Two-Step)	Luna Universal	One-Step Real-Time	One-Step	TaqMan™ Fast Virus 1-	AgPath-ID		NEB Luna	Virus Fast, AgPath.	One Step PrimeScript		QuantStudi o One,	One-Step gPCR kit	"Taqman Fast Virus 1	LightCycler Multiplex
33. Gene targets (e.g. N1, N2, N3, E genes)	N1, N2, N3	N1, E	N1, E	E_Sarbeco; N2 CDC	nsp14	N1, N3	E, N and RdRp	N1 and N2	lp2	N1, N2	RdRP/N	ORF1AB, S gene, N gen	orf1ab. S. N	RdRP and E genes
34. Reaction mix description	20x RT (1x final), 2x	5 µL	5 µL	5 μl RNA sai	see	Commercial		as indicated by		Published	LyomixRT-	Taqman	gene	gene primers and
35. Thermal cycling parameters used	two-step protocol: 40		50 °C for 30	50 °C for 5 m	see	CDC	WHO protocol	as indicated		Published	Retrotransci		RT step +	RT step + denaturatio
36. qPCR controls (NTC, positive controls, negative controls)? If yes, which ones?	NTC, positive,	Positive: Synthetic	Positive: Synthetic		NTC, positive	NTC, positive	NTC, C+, C-	NTC, positive	positive control,	Yes	Yes, Positive,	NTC: DNAse- free water,	Negative control:	Negative control:
37. LOD (no. of copies)	· · · · ·	3	3 copies/reac		1.46 g.c./μl		3,99 (E gene); 5,52	cca 20	50 gc per rxn	670 UG/L	· · ·	<u> </u>	in progress	
38. LOQ (no. of copies)		10	10	230/100 ml			0	cca 500	not determined				in progress	
39. Efficiency of method from sample preparation to analysis (%)		Not available	Yes (depending	on average	///	>90	50-70%		>1%	-	Not	Still not calculated	in evaluation	not yet
40. How many qPCR replicates have been used (average range)?	01-Feb	2 to 3	3	2	///	2	1-3	3	2	2	15	1	2	2

	REPORTING OF RESULTS		Quest 5-8	Quest 9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
	44 Construct for CADC CoV 2 positive controls and positive constants										24(control),			Positive	Positive
	41. C _t values for SARS-CoV-2 positive controls and positive samples	<40	Yes	Yes	35: 33-40	yes	15-38	yes	yes	Yes	30-37	No	Yes	controls:	controls:
	42 Consentention of CARC CoV 2 is positive uncertainty of a second of a second of a second of		Yes,	Yes,		yes	average							5-20	
	42. Concentration of SARS-CoV-2 in positive wastewater samples (no. of copies/mL of sample)	10 - 500	quantified	quantified	< LOD - 70	(copies/L of	10^4	yes	yes	Yes (gc/L)		No	Yes	copies/mL	>0,01
	42 Concentration of CADC CoV 2 in protition weather services (or of environment)		Yes,	Yes,	not									not	not
	43. Concentration of SARS-CoV-2 in positive wastewater samples (no. of copies/ng RNA)		quantified	quantified	calculated	no	not known	no	no	No		No	No	analysed	analysed
44.	AA Unservice of successful (0/)		Not	Yes				yet to be					Still not	not	not
	Uncertainty of quantification (%)	20 - 30	available	(depending	not known	no	not known	estimated	no	No		No	calculated	calculated	calculated

COVID-19 DATA (pairing of SARS-CoV-2 with epidemiological data)	Quest 1	Quest 5-9	Quest 10	Quest 11	Quest 12	Quest 13	Quest 14	Quest 15	Quest 16	Quest 17	Quest 18	Quest 19	Quest 20
45. Do you have access to the following information?:									No				
45a. SARS-CoV-2 positive persons on day of sampling in the catchment area of city/municipality	yes	Yes	Yes (partially)	yes (data for	No	yes	yes	No	No	Yes	YES	Yes	Yes
45b. SARS-CoV-2 positive persons on previous day of sampling in the catchment area of city/municipality	yes	Yes	Yes (partially)	yes (data for	No	yes		Depending on the	No	Yes	TES	Yes	Yes
45c. Cumulative number of people recovered on day of sampling in the catchment area of city/municipality		Yes	Yes (partially)	yes (data for	No	yes	could likely get it	No	No	Yes	YES	Yes	Yes
45d. Cumulative number of people under treatment on day of sampling in the catchment area of city/municipality		Yes	Yes (partially)	yes (data for	No	no	could likely get it	No	No	Yes	YES	Yes	Yes
45e. Cumulative number of people under treatment on day of sampling in country		Yes	Yes (partially)	yes	No	no	could likely get it	No	No	Yes	YES	No	No
45f. Hospitalized COVID-19 patients on day of sampling in the catchment area of city/municipality	no	Yes	not known	yes (data for	No	yes	yes	No	No	Yes	YES	Yes	Yes
45g. Other COVID-19 data (Which)			Yes	///		no		None	Yes	Yes, People with		R (calculated)	R (calculated)

Table 10 - 0	Overview on	cost information	provided from	EU Survey
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Country of your affiliation	Estimated population equivalent	Currency used	Question 1 (in €)	Question 2 (in €)	Question 3 (in measurements per day)	Question 4 (in €)	Question 5 (in €)	Question 6 (in hours)	Question 7 (in €)	Question 8 (in €)
Belgium	70000	€ after conversion from USD	68	No info	5	323	No info	48	40,8	No info
Hungary	3400000	€ after conversion from HUF: 0.0028	No Info	56	8	140	No info	56	196	No info
Italy	2500000	€	50	50	6	100	200	72	500	No info
Luxembourg	437188	€	20	120	10	100	120	24	180	80000
Netherlands	3200000	€	50	200	6	550	750	36	550	2000000
Portugal	2500000	€	400	450	16	125	200	36	100	1500000
Spain	1866617	€	25	100	4	220	245	32	245	No info
Spain	200	€	20	50	4	50	80	3	60	1500000
Spain	420000	€	30	100	5	130	230	48	No info	1000000
Spain	140000	€	No info	No info	5	108	100	24	280	No info
Spain	1876499	€	63	123	8	212	336	15	336	102850
UK	6000000	€ after conversion from GBP: 1.10	154	154	20	55	121	48	110	275000

Question 1: If shipment is necessary in the sample collection process, e.g via a courier service, how much do you pay for one shipment on average?

Question 2: Considering the information above, how much is the estimated cost to fetch one sample and deliver it to the laboratory?

Question 3: How many SARS-CoV-2 measurements do you perform on average per day in your laboratory?

Question 4: What is the estimated cost of performing 1 measurement in your laboratory? (Express in your local currency and consider ONLY costs at laboratory level, i.e. without sampling and shipment)

Question 5: What cost would you charge for the service from sampling to measurement for one sample?

Question 6: How much time is needed from the moment of sample collection to have the result?

Question 7: Considering the aforementioned estimates, what is the total cost in your laboratory for 1 sample?

Question 8: Assuming one would plan upscaling to a fully-fledged national study, what is you estimated budget need?

Table 11 – Overview on agglomerates reported under the Urban Wastewater Treatment Directive.

Data are from the 8th Reporting with the exception of IT and PL (marked by *), where data are from the 7th Reporting.

Country	Very small	PE	Small	PE	Medium	PE	Large	PE	Very large	PE
AT	376	1623179	44	458675	188	6680190	13	1648650	15	8992000
BE	231	1064500	41	509900	94	3316800	4	508500	10	3779100
BG	256	961498	38	457568	57	2322150	4	471347	9	4012996
СҮ	46	192300	3	36700	6	256000	0	0	2	400000
CZ	466	2009060	42	513445	83	2730938	3	305811	4	2031350
DE	2200	10694869	482	5991244	1209	42826525	66	7994169	111	45371615
DK	257	1249769	42	546127	106	4359904	13	1584900	11	3867245
EE	38	176291	5	64151	12	439388	1	123000	3	839936
EL	370	1567625	39	471860	72	2540822	5	654546	6	7066000
ES	1422	6719997	200	2490009	453	17071609	46	5584790	87	36405951
FI	146	655800	16	194400	46	1759300	2	254500	6	2375700
FR	2187	9886924	232	2913452	619	22490725	42	5059767	67	31192824
HR	190	845795	28	356353	58	2188375	1	129933	4	1547181
HU	311	1587460	57	709061	115	4024488	6	746903	9	4597275
IE	105	451729	22	268889	38	1386373	2	231000	3	2826025

Country	Very small PE	Small	PE	Medium	PE	Large	PE	Very large	PE
IT*	2066 9801211	266	3305606	735	27722996	57	6981115	79	33249657
LT	33 155200	9	112400	19	744700	2	242000	4	1483600
LU	35 158682	3	35433	8	235141	0	0	1	228741
LV	53 231088	9	107027	15	534519	1	113497	1	762739
MT	0 0	0	0	2	73195	0	0	1	429009
NL	85 524954	23	284343	167	6839309	15	1788856	33	8181025
PL*	645 3295663	192	2376625	370	14013960	24	3000573	56	20839639
РТ	269 1248336	24	299240	92	3426787	15	1875700	13	4803550
RO	1626 6207800	71	857486	125	4485448	11	1425034	19	8433407
SE	212 1031978	34	424764	98	3581981	10	1345967	13	6278305
SI	132 523921	9	106147	15	395885	1	133977	1	302293
SK	275 1113392	23	280901	51	1749393	4	470108	3	1365832
TOTAL	14032 ⁶³⁹⁷⁹⁰²¹	1954	24171806	4853	178196901	348	42674643	571	241662995

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