

National Incident Management Team

(v2 for sign off 20/09/21)

Terms of Reference

1. Title

National Incident Management Team

2. Accountable to

CMO

Reporting to Scottish Government will be through the provision of advice provided by the National Incident Management Team Chair(s) from the National Incident Management Team (NIMT) meetings. NIMT will also make contribution through lessons learned and recommendations in reviewing the pandemic in any debriefing.

3. Scope

All public health aspects of the management of COVID-19 within the Scottish population

Out of Scope:

It is noted, for clarity, that the following remain out of scope for the NIMT as a whole:

- The work of professional bodies, groups and networks to thereby avoid duplication or role or activities;
- National or local procurement and supply of medicines or equipment.
- Local coordination, resources and delivery remain the responsibility of each NHS Board and/or local authority;
- Corporate governance and quality assurance arrangements of individual member organisations. However, issues arising pertinent to NIMT operation/delivery would be raised by the organisation concerned through appropriate governance and risk/issue management arrangements;

4. Remit of the Group

a) Specific Elements:

The remit and responsibilities of the group and its members are:

- Co-ordinate/manage national developments in a consistent manner to improve the prevention and control of COVID-19 disease threats in Scotland;
- Facilitate the sharing of information, experience and latest developments in respect of COVID-19 disease with relevant stakeholder groups and networks in Scotland and the UK (e.g. COVID-19 so as to be aware of emerging issues and to disseminate relevant risk assessment and health protection information.
- Provide advice and recommendations to the Scottish Government on operational issues in relation to implementing actions, policy and/or guidance for this topic area in Scotland;
- Consider, prioritise and make recommendations for the development of any new work streams required to improve the prevention or control of COVID-19 disease threats in Scotland;
- Liaise with and support researchers and research networks to contribute to the identification of information and knowledge gaps and suggest further research in line with the scope;
- Consider and make recommendations for surveillance in Scotland in line with the scope.

b) General Elements

- Manage agreed national actions/initiatives in a consistent manner and be accountable to CMO
- Establish and maintain an infrastructure that will support the introduction of such developments and agree any sub-groups required;
- Consider any significant impact(s) on the agreed way forward and provide direction to NIMT sub-groups. It will then be up to the sub-groups to incorporate changes into the relevant programme for delivery;
- Promote, and support the sharing of good practice, latest developments and quality assurance in line with the quality assurance function of the SHPN;
- Operate on an exception basis, identifying and addressing potential and evolving high-level risk(s) and issue(s) and report these to the CMO (& SG Covid Co-ordination Directorate);
- Ensure partnerships are in place with the relevant stakeholders in advance of introducing new initiatives or developments;
- Identify needs and requirements for education resources, workforce development, guidelines/guidance or modifications to CMS & HPZone. Submit these to the relevant functional group

5. Co-Chair Arrangements for the Group

The Group will be Chaired by the following:

Chair: Dr Jim McMenamin, Public Health Scotland

Co-Chair: Professor Nick Phin & Prof David Goldberg, Public Health Scotland

Deputy chairs: Dr Maria Rossi and Dr Duncan McCormick

6. Group Secretariat Support

Public Health Scotland COVID-19

7. Decision Making

Decisions and actions will be recorded within the Action Notes of the meeting. In the event that a decision cannot be reached due to any conflict arising, the matter will be escalated initially for resolution to the CMO where the matter pertains to health protection services.

In the event of a sudden high impact issue arising for health protection services that necessitates immediate decision making, the matter will be escalated to the CMO (& Covid Co-ordination Directorate) with the following deemed as acceptable quorate for decision making by teleconference, email or by meeting in person:

- Scottish Government CMO (& Covid Co-ordination Directorate) representation
- NHS Board HPTs / SDsPH representatives

8. Frequency of Meetings

Meetings will be held 2 times per week, subject to regular review but may be subject to change as required.

Adhoc meetings may be arranged as required in the event of high impact risks/issues or opportunities arising. The decision to call an adhoc meeting can be made by one of the Chair/co-Chairs.

9. Record of Meetings

Meetings of the group may be audio recorded and following sign off of the Action Notes, recordings would be deleted. All meeting papers will be available on the PHS Microsite with the exception of those with a restricted distribution marking (eg. confidential, commercial).

Microsite login details are available to all group members (with the exception of commercial suppliers). It is the responsibility of authors to clearly mark documents and electronic files provided as meeting papers.

10. Location of Meetings

Normally by video/teleconference from Public Health Scotland, Meridian Court, Glasgow.

11. Confidentiality

It is likely that information may be of a sensitive or confidential nature. It is vital that all members understand their responsibility to treat as confidential, information that may be available to them, or obtained by them, or that may be derived whilst working in the Group.

It is the responsibility of authors to clearly mark any documentation or communication containing information of a sensitive or confidential nature to ensure it is easily identifiable to recipients. Authors are asked to do so in both the subject line and the body of an email. Equally within the filename and within the document (e.g. header, footer watermark) itself in accordance with data protection guidelines. Authors should also be aware and consider that information considered to be Confidential may be required to be disclosed under the Freedom of Information (Scotland) Act 2002 or Environmental Information (Scotland) Regulations 2004.

Individuals must not breach this duty of confidence by disclosing, or using in an unauthorised manner, confidential information, or providing access to such information by unauthorised individuals or organisations. Information considered to be Confidential may, however, be required to be disclosed by law, by court of competent authority, by a requirement of a regulatory body or under the Freedom of Information (Scotland) Act 2002 or Environmental Information (Scotland) Regulations 2004.

12. Competing Interests

PHS is committed to an open declaration of competing interests in all its activities as outlined in the ***Policy on Declaration of Competing Interests***.

Competing interests are defined as any interest of the person, their partners or close relatives (personal) or their department/employer/business (non-personal) which may potentially influence the content of **NIMT recommendations or decisions**. For clarity, the interest of partners or close relatives is restricted to employment in, or share holdings in, healthcare organisations. Competing interests include financial and non-financial interests as defined in the NIMT policy document referenced above.

If, during the course of any NIMT meeting, an individual becomes aware of a potential competing interest this should be **declared at that time to the group**. If the level of declared interest could be seen to limit the independence of an individual, the Chair must apply one of the two courses of action below which shall be recorded in the note of the meeting:

- The individual shall be asked by the Chair to step out of the room for the entire agenda item (i.e. discussion, recommendation formulation, decision making);
- The individual shall participate in the discussion but will be instructed by the Chair not to vote during decision making nor participate in the formulation of recommendation(s);

Where the level of declared interest could be seen to limit the independence of the Chair, they should not chair that part of the meeting.

Written declarations of competing interests will be monitored by Chairs of NIMT groups and meetings in line with this policy.

Public Health Scotland will hold all declarations of competing interests on behalf of the NIMT Chairs.

13. Lifespan of Group

The terms of reference shall be reviewed after 1 year as part of the governance arrangements for the NIMT.

14. Membership

Membership of the group comprises the following (tbc):

- Public Health Scotland (Chair/Response lead/Epi lead/Test & Protect/Guidance/Comms)
- CMO

- Scottish Government (Covid Co-ordination Directorate) with additional SG members drawn from Outbreak Management Response, Community Surveillance, Covid Ready Society, Covid Testing and Contact Tracing Policy, Covid Public Health Directorate and SG Modelling teams.
- All territorial NHS boards (DPH & PH HPT representatives from all NHS boards)
- NSS NCTC
- NHS24
- SOLACE
- COSLA
- Adhoc invitation to specific participants for items as required

NIMT group members have a responsibility to communicate and consult effectively between the network and the organisation or constituency whom they represent. Members are expected to have delegated authority on behalf of their respective organisation or constituency and are able to commit to the decision making of the NIMT.

All group members are responsible for cascading information effectively from the NIMT to professionals within their own organisation or constituency to keep them abreast. Equally, each member is expected to consult within their own organisation or constituency to enable them to provide and represent the views of their organisation or constituency at group meetings and when responding to electronic consultations from the network.

Additional members can be co-opted on to the group on an ad hoc basis. Examples include infection control doctors, PHE Reference Laboratories

Attendance

Members are requested to ensure their organisation is represented at each meeting. When a member is unable to attend, the expectation is that they will arrange for an appropriate deputy to attend in their place.

APPROVAL:

Terms of Reference Agreed:	<i>Signed off formally by the NIMT at their meeting on 25th September 2020 and recorded in the action log.</i>
Date:	
Amendment Agreed	Presented for sign off by NIMT at their meeting on 23 rd September 2021.
Date	