MEMORANDUM E (21) 38 (C)

FROM: FIRST MINISTER

**DEPUTY FIRST MINISTER** 

DATE: 11 FEBRUARY 2021

TO: EXECUTIVE COLLEAGUES

FINAL EXECUTIVE PAPER – EXECUTIVE COVID-19 TASKFORCE: STATUS UPDATE AND FORWARD WORK PROGRAMME

## 1. Introduction

- 1.1. The focus of the Executive's response to the COVID-19 pandemic during 2020 has been on the public health response. The restrictions and relaxations implemented throughout the year were developed with cross Departmental input but without hindsight or lessons learned from managing a historic global pandemic.
- 1.2. Given the extent and scale of the restrictions and pressure on our health service, the need for a broader plan is now required for 2021, which will outline the Executive's overall approach to managing the pandemic. This will include how restrictions are to be implemented and reviewed through 2021.
- 1.3. The Executive's COVID-19 Taskforce (ECT) has been established as a necessary step-change in the Executive's response to the evolving nature of the pandemic.
- 1.4. The ECT is leading and co-ordinating an integrated programme of work of response to, and recovery from, the COVID-19 pandemic. In practice, it

does not represent new machinery; rather it comprises the totality of government's response to the pandemic, across all Departments.

- 1.5. Whilst the environment within which the ECT is operating is inherently unpredictable and largely outside its control, the Executive's ambition is that the ECT will provide an agile and proactive way to address new and emerging issues, which can in turn ensure alignment with other key Executive priorities, including the Programme for Government, Budget 2021/22 and managing the implications of EU Exit.
- 1.6. The ECT will provide practical co-ordination, support and alignment of the Executive's overall response to the pandemic. It will do this both by drawing together the work that is already taking place across key operational Departments, Local Government and public sector agencies and also through workstreams commissioning and undertaking additional work as they consider necessary. In fulfilling its role, it will not assume or cut across existing Ministerial and Departmental responsibilities and accountability but it does rely on cooperation, information sharing and collaboration between senior officials in TEO and operational departments.

## 2. ECT Structure

2.1 The ECT is led by the Interim HOCS, who has convened a Strategic Oversight Board that meets regularly. The Terms of Reference for the ECT have been agreed and are attached at **Appendix 1**.

**OFFICIAL - EXECUTIVE** 

2.2 The ECT has initially structured its work under four workstreams:

Protect.
Recovery.
Adherence.
Strategies
Enablers

- 2.3 Work under each of these areas is being led by the Permanent Secretaries of DoH, DfE, DfC and DoJ and the Head of EIS, who each sit on the Strategic Oversight Board. The Strategic Oversight Board has met a number of times and work has been progressing within each of the workstreams as outlined in this paper.
- 2.4 Membership of the Strategic Oversight Board, and indeed the ECT more widely, can be flexed to include representatives from other Departments to lead on sector-specific issues as they arise.
- 2.5 The ECT will provide a monthly Delivery Report to the Executive which will outline key progress across each of the workstreams, together with details of key issues, plans and actions. The ECT will also consider ways of communicating its collective work to a wider audience that can complement the Executive's broader management of the pandemic.

## 3. ECT Programme Status

ECT Support Function

- 3.1 TEO provides a cross-cutting ECT support function that helps to minimise the programme overhead in each of the workstreams and provides a suite of products to help enable workstream delivery. The sharing of information across workstreams will be critical to the effectiveness of the ECT and TEO's support function will help to facilitate this process. TEO's role therefore includes:
  - <u>Programme support</u>: the co-ordination of cross-departmental meetings, assistance with workstream collaboration and programme documentation, including:
    - Monthly ECT reporting to provide a central update on workstream progress, issues, plans and actions;

- o Local or international research or data to support the ECT;
- Support in definition and collaboration of a scenario planning framework, so all workstreams can produce consistent and interoperable risk/issues registers and contingency plans;
- Support with the document creation and associated process associated with risk templates for 2021 submissions (or replacement process as defined through the Protect workstream); and
- Support in the consistent production and sharing of work programmes for the workstreams to help align plans.
- <u>Foundation Products</u>: these are common documents and reference material that can be used to aid and streamline workstream delivery.
   These include:
  - A 2020 COVID-19 almanac a diary of all events, restrictions, relaxations and other relevant milestones in 2020 referenced against key metrics, data and sentiment on those dates;
  - A retrospective decision log containing details of the decisions made on key restrictions and relaxation events undertaken in 2020 including the data and relevant evidence before and after the decision was implemented;
  - A 2021 Horizon Scan identifying key milestones, events, holidays, Brexit grace periods and other dates that will help inform every workstream plan;
  - An overall integrated Executive-wide ECT plan for 2021,
     through consolidating workstream programme plans; and
  - A revised, strategic 'Pathway to Recovery' publication to provide a public facing narrative of the ECT intent.

# Protect Workstream

3.2 Detailed work programmes in relation to the Protect workstream have been established and are being delivered as part of the Department of Health's

(DoH) role as the lead operational department for vaccines, testing and Health Regulations. The ECT will not replicate or add to any of these structures. Rather, it will play a key role in assisting DoH with its work by improving and enhancing cross-Departmental understanding of the scope and timing of the testing and vaccination programmes and any associated public health messaging requirements.

3.3 At its meeting on 21 January, the Executive agreed to extend the current restrictions for a further four weeks to 5 March. One of the ECT's current priority tasks is the development of a refreshed 'Pathway to Recovery,' that will outline the strategic process by which we will exit these restrictions. In that respect, Foundation Products, including the retrospective on 2020 relaxations/ restrictions, will help to inform this work.

# Recovery Workstream

- 3.4 The Executive has agreed a Framework which outlines its approach for placing the citizen at the centre of an economic, societal and health recovery. This Framework was approved in September 2020 and now needs to be reviewed in light of the current phase of the pandemic. Recovery needs to focus both on the economy and also the wider community and societal issues; it also needs to be considered in the context of the Budget for 2021/22, the development of the longer term Programme for Government and the implications flowing from EU Exit.
- 3.5 Dialogue is progressing now with DfE and DfC colleagues and it is already clear that local government can play a key role in this workstream. The work of the High Street Taskforce should also be aligned to the overall strategy on recovery.

#### Adherence Workstream

- 3.6 The objective of the adherence workstream is 'To maximise the extent to which individuals and communities adhere to the public health laws and guidance relating to COVID-19 and to provide input to the design of the restrictions proposed'.
- 3.7 The focus of the workstream is on practical steps that can be taken quickly. Where major new policy directions are proposed, they will be presented to the Executive for decision.
- 3.8 As an early action, the workstream is exploring the evidence base available here and from other jurisdictions. Inevitably the same COVID related problems are being faced widely and the issue of adherence is one facing everywhere where there are significant restrictions. The key comparators here are other liberal democracies, as there is evidence of differing attitudes and behaviours in societies more used to less personal freedoms. The initial evidence review suggests there is scope for a number of smallish interventions rather than one single measure which would make a massive difference.
- 3.9 To date, the group has identified the need to address the following:
  - Engage behavioural science expertise to assist with the practical implementation of the COVID response. Suitable external expertise has been identified and will commence work over the coming weeks. Their purpose will be to augment existing capacity as well as complement the capability currently available through DoH/PHA and DoF's iLab;
  - Identify the gaps in adherence currently and how the position might be improved—drawing on the expertise of the Chief Scientific Adviser and DoH. To date, CSA has suggested work be done on how to improve the compliance with levels of self-

isolation and how to identify, engage and harness community champions to assist with the messaging within communities.

The group has contributed to the targeting of weekly messaging, for example in relation to house and workplace gatherings.

Work is also being progressed in relation to options for addressing prolific/ repeat offenders;

- <u>Build the evidence base</u> as referenced above, including identifying gaps and how they might be filled. PHA information, as well as work done in other jurisdictions, are being explored;
- <u>Track behaviours in real time</u> to identify where problems might be emerging using information provided by PSNI, Local Government and PHA; and
- Look forward to the likely future challenges in responding to the pandemic, with particular focus on where future adherence to restrictions might become even more challenging (e.g. attitudes once larger groups of people have been vaccinated).

## Strategic Communications Workstream

3.10 The ECT has agreed that the overall requirement is to provide additional capacity for EIS that will enable a focus on strategic communications, and allow the Head of EIS to focus on operational communications with DoH continuing to lead on day to day public health messaging. This would include developing a strategic communications strategy for the next 6-9 months across all Executive Departments and providing advice on strategic media engagement. SIB has therefore been commissioned to identify a Strategic Communications Adviser to fulfil this role and consideration of options remain ongoing.

# 4 External Engagement

- 4.1 Throughout the course of the pandemic to date, officials in many departments and the Junior Ministers in particular, have been leading on a programme of engagement with key sectors, including retail, hospitality and faith leaders, as well as PSNI and Local Government. This collaborative approach has helped shape some of the Executive's decisions and increase adherence to the measures that have been implemented.
- 4.2 These engagements will continue to play a key role throughout 2021 as the Executive continues to work in partnership with these key stakeholders. The ECT will seek to add value by informing and providing advice to these engagements on key messages and other measures to help increase adherence to the public health regulations and guidance.

THE RT. HON. ARLENE FOSTER MLA First Minister

MICHELLE O'NEILL MLA deputy First Minister

# 5 ECT Delivery & Outcomes

**Table 1: Priority Deliverables & Focus Areas** 

	Taskforce Support	Protect	Recovery	Adherence	Strategic Communications
Feb 2021	Foundation Products	Ongoing focus on	Review/ update	<ul> <li>External BI support to be</li> </ul>	<ul> <li>Appointment of</li> </ul>
	developed:	vaccination	Recovery	procured	Strategic
	o 2020 Timeline;	programme	Framework from	Gaps in adherence to be	Communications
	o Covid Almanac/	Mass Testing	September 2020	identified	Adviser
	Retrospective;	Pathway to Recovery	Production of Work	Support for those self	
	o Horizon Event	'2.0' to be developed	Programme	isolating to be completed	
	Scan for 2021	Review of NPIs to be		Community Champions in	
	Restriction/Relaxation	completed		place	
	Lessons Learned	Updated Restrictions		Evidence base to be	
	deep-dive			developed	
	Scenario Planning				
	ECT Reporting/ Status				
	(monthly)				
Mar 2021	Strategic ECT Plan for		Strategic Recovery		Development of
	2021/22		Plan developed		Strategic
					Communications
					Strategy
	ı	1	1	Providing advice/input to external engagement with key	
				sectors & faith leaders led by Junior Ministers	

#### **EXECUTIVE COVID-19 TASKFORCE**

## **TERMS OF REFERENCE**

# **Purpose**

The Executive's Taskforce will provide a high level umbrella structure for the programme of activities involved in managing the response to and recovery from the COVID-19 pandemic. In so doing, this will:

- Improve clarity of overall mission, by providing a bridge between the Executive's priorities and the collective actions across government;
- Provide the Executive with re-assurance of a collaborative response to delivery and strategic interventions;
- Provide the Executive with a complete picture of how the pandemic is being managed; and
- Enable the Executive to communicate measures and progress in a citizen focused way.

#### Role

The Taskforce will fulfil its purpose by:

- Ensuring that all relevant stakeholders are involved in the COVID-19 response and recovery activities.
- Providing practical co-ordination, support and alignment of the overall response to the pandemic across key operational Departments, local government and public sector agencies.
- Establishing appropriate workstreams as required.
- Ensuring the co-ordination and delivery of consistent messages to the Executive, general public and media.
- Maintaining a clear focus on strategic health, economic and societal recovery.

## **Key Operating Principles**

The Taskforce is an Executive-led programme that will:

- Build on, rather than replace, existing delivery arrangements.
- Respect and not cut across existing Ministerial and Departmental responsibilities and accountability.

- Provide a forum where all parts of the system can have meaningful and engaged dialogue, with the aim of improving understanding of each other's positions and actions to maximise the outcomes for citizens.
- Ensure that activities are joined up with other key work areas, including EU Exit/Future Relations and the Programme for Government.

#### Structure

The Taskforce will comprise a Strategic Oversight Board and four workstreams:

Protect.
 Strategies

Recovery.

Adherence. Enablers

Strategic Communications.

# Membership

The Strategic Oversight Board will comprise:

- Interim HOCS (Chair).
- Permanent Secretary DoH.
- Permanent Secretary DfE.
- Permanent Secretary DfC.
- Permanent Secretary DoJ.
- TEO Director of COVID Response.
- Head of EIS.
- Workstream Leads and external expertise may be invited to attend.
- Other Departments as required.

It is expected that members will prioritise meetings of the Taskforce. In the exceptional circumstance where this is not possible, a named deputy of at least Deputy Secretary level may deputise.

The Taskforce may engage additional external expertise as necessary, including from the private sector and academia, to encourage constructive challenge and assurance, as well as innovative thinking, building on lessons learned from other logistical initiatives elsewhere.

# Meeting and Reporting Cycle

The first meeting of the Strategic Oversight Board to take place in December 2020 and will aim to meet fortnightly thereafter.

Any relevant papers prepared by lead operational Departments and/or their Ministers to be shared with Taskforce members to help inform the work of each workstream.

The Taskforce will consider update reports from each of the workstreams and will discuss further actions and additional steps required.

The Taskforce will report formally to the Executive on a monthly basis.

There will be some standardising of reporting and risk management to the Executive but workstream leads will remain responsible for overall delivery, governance and accountability of their activities.

## **EXECUTIVE COVID-19 TASKFORCE**

