

**NI Contact Tracing Service
Steering Group)
Scoping Document**

Terms of Reference

Strategic Aim

To slow the spread of COVID-19 pandemic in NI and lessen the impact on HSC services, through preventing community transmission of COVID-19 when social distancing measures are relaxed, by:

- identifying cases of COVID-19 and clusters;
- tracing their contacts;
- providing information on symptoms they should be aware of and actions to take should they develop symptoms and risk assess if they need to self-isolate; and
- providing rapid and seamless access to testing, if required.

Purpose

To establish a contact tracing programme for contacts of cases of COVID-19 in Northern Ireland week commencing 11th May 2020.

The initial service will build on the work of the PHA pilot and plans already developed and progressed by the PHA. It is estimated that this will cover the first 8-12 weeks while a longer-term model for the next 18-24 months is developed and made operational.

Project Objectives

- To deliver an extensive and comprehensive contact tracing service across NI which may be from a number of locations including home working;
- To confirm the service model of contact tracing, including traditional contact tracing elements and be technology enabled which will be used to provide a consistent regional approach, as informed by the evidence base and the policy;
- To recruit and train suitably experienced staff/volunteers;
- To provide appropriate IT platforms to support the work;
- To identify and secure resources and facilities for the service;
- To identify appropriate governance, project management and administrative support for the service.

Project Board roles and responsibilities

The Project Board will report to the Chief Medical Officer.

Ultimate responsibility and decision making for the project lies with the Minister, informed by the recommendations of the Chief Medical Officer, based on the advice of the Project Board. The roles and responsibilities of the Project Board are to:

- Act as the decision-making body in respect of project outcomes;
- Authorise the initiation of the project;
- Agree the terms of reference of the project;
- Provide guidance and direction in the major stages of the project;
- Authorise programme expenditure requested by workstreams where expenditure is greater than £xxx;
- Shape and agree project outputs;
- Ensure that the outputs of the individual workstreams are consistent and synchronised across the project;
- Ensure that the outputs are consistent and synchronised with testing capacity and IT platforms;
- Put forward relevant and specialist viewpoints;
- Resolve major project issues;
- Seek to address any major project risks;
- Sign off the products produced during the project; and
- Authorise final project closure.

The Project Board will meet 2-3 times weekly in the initial stages.

The Project Board will provide twice weekly reports to the CMO (midday Tuesday and COP Friday).

Workstream Groups

A number of workstream groups will be established to take forward the Steering Group's priorities. The Workstream groups will report to the Steering Group and each workstream will have an assigned workstream lead. The membership of the workstream groups will reflect the needs and appropriate interests associated with the workstream objectives.

Membership

Elizabeth Mitchell (Chair)

Gillian Armstrong (DoH)

NR (DoH)

Alistair Finlay (Vice Chair)

NR (PHA)

Hugo Van Woerden (PHA)

Brid Farrell

NR (PHA)

NR (UUJ)

Olive McLeod (PHA)

Vivian McConvey (Patient and Client Council)

NR (BSO HR)

Dan West (DoH)

DoH Finance lead – **NR**

DoH policy leads **Name Redacted**

Comms Lead – Stephen Wilson

Legal Advice BSO – **Name Redacted**