





Mobile applications to support contact tracing in EU's fight against COVID-19

Effectiveness Monitoring digital proximity tracing apps

eHN meeting COVID-19 - coordinated actions 16 September 2020

Common EU approach on mobile applications to support contact tracing for COVID-19

COMMISSION RECOMMENDATION (EU) 2020/518

of 8 April 2020

on a common Union toolbox for the use of technology and data to combat and exit from the COVID-19 crisis, in particular concerning mobile applications and the use of anonymised mobility data



The app detects epidemiologically relevant proximity with other app users



COVID-19, they receive a confirmation code by health authorities and they can insert it in the app



User who were in proximity to infected users receive an alert. They can seek advice, self-isolate and receive testing as appropriate

European Commission



eHealth Network

Mobile applications to support contact tracing in the EU's fight against COVID-19

Common EU Toolbox for Member States

Version 1.0

15.04.2020



WHY

c. Monitoring the effectiveness of the apps

Member States should develop a set of KPIs to assess/reflect the effectiveness of the apps in supporting contact tracing.

Peer-reviews at national level, but also among Member States and coordinated at EU level, to allow the review of the effectiveness and functioning of the chosen mobile applications, as well as the balancing with the fundamental rights requirements, are particularly encouraged. This should include independent technical reviews, including indepth audits of the apps in terms of security, privacy or accessibility, ideally coordinated at European level (e.g. via an independent testing facility). Such independent assessments can be coordinated with the assessments conducted by national authorities, for example cybersecurity agencies, and will help increase trust, a vital condition for uptake and success.

Annex I – Supporting Actions

SUPPO	ORTING ACTIONS				
Id	Supporting action	Description	Relevant actors Related measure(s)		
SA01	Information sharing/ Sharing of epidemiological information	Depending on national settings, possibility to transmit anonymised/aggregates or pseudonymised data to national epidemiological and/or research institutions (based on consent or national law) for analysis. Transmission of aggregated data to national authorities and ECDC – to be defined (eg distribution of number of contacts per cases by age and gender and changes over time (for example before and after lifting of containment measures), or percentage of contacts testing positive by type of contact exposure (proximity and duration) Member States in the eHealth Network will set up a system that will allow for an iterative process of continuous monitoring and evaluation of the functioning of their apps. When doing this analysis, the eHealth Network will seek input from the Health Security Committee. Ad-hoc meetings between the eHealth Network and Health Security Committee could be set up.	National health data authorities, epidemiological institutions research institutions ECDC eHealth Network Health Security Committee Input from technical communities (m-health, New Generation Internet etc)		



EU national contact tracing apps - status

	Decentralised	Centralised	TOTAL
Online	AT, IT, LV, DE, PL, DK, IE, HR, (ES), NL, FI, EE, PT	FR	14
Development	BE, LT, CY, CZ, MT		5
TOTAL	18	1	19
To be	SK, BG, EL, ?SI,	5	
confirmed	LU, SE, RO	3	
Not planned	NO		1
Suspended			



Download indicators

Updated: 📋 09 Sep 2020

Member States	Architecture	Downloads	Date of launch	Population (Eurostat)	Downloads as a percentage of population	Percentage of total downloads	Source	Notifications/alerts initiated	Comments 09-09-2020
AT	Decentralised	906.000	25-03-2020	8.858.775	10%	2,3%	Confirmed in eHealth Network meeting (29/07 /2020)	~56 people send red warning(infection), ~513 people send yellow warning (symptoms), 376 (green)	
CZ	Centralised Moving to Decentralised	250.000	30-06-2020	10.693.999	2%	0,6%	Confirmed in eHealth Network meeting (09/09 /2020)		We are running centralised app. We are preparing a 2.0 V (to be realised next week) following a decentralised application.
Υ	Decentralised		Mid- September	888.005	0%	0,0%	Confirmed in eHealth Network		

Monitoring the effectiveness of proximity tracing apps

WHAT & HOW



Open questions

- Towards a common, feasible approach/framework/set of KPIs
- What are the questions we want to answer regarding effectiveness and success of the apps
- Which dimensions to capture:
 - technical properties, uptake, adherence, safety, efficacy or effective attributes or impacts and social, legal, ethical and political impacts
- · Which set of indicators do we need



Suggestions received from MS

- rough download and (re)install numbers from the appstores
- number of running apps at any given time
- number of people that have got a warning (self declared) and called the PHA
- number of people that were tested positive and agreed to share their keys
- the approximate number of people that completed submitting their key as a result of above

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For discussion: draft ECDC/WHO evaluation indicators for mobile apps in support of contact tracing

- A: To what extent is the mobile app used?
- B. Are mobile apps successful in detecting contacts?
- C. Are mobile apps successful in detecting contacts that have not been identified through conventional contact tracing?
- D. Are mobile apps faster in notifying contacts compared to conventional contact tracing?
- E. Are app users linked to public health services?







Thank you



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