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

Effectiveness Monitoring digital proximity tracing apps

Birgit Morlion – EC – CONNECT/H3

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

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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

If users test positive for 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

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Stick to essential requirements for national apps

Fully compliant with EU data protection and privacy rules *	Approved by public health authorities	Installed voluntarily	Dismantled as soon as no longer needed	Latest privacy-enhancing technological solutions (likely Bluetooth)
Based on anonymised data	Interoperable	Anchored in accepted epidemiology guidance	Reflect best practice in cybersecurity and accessibility	

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Monitoring the effectiveness of proximity tracing apps

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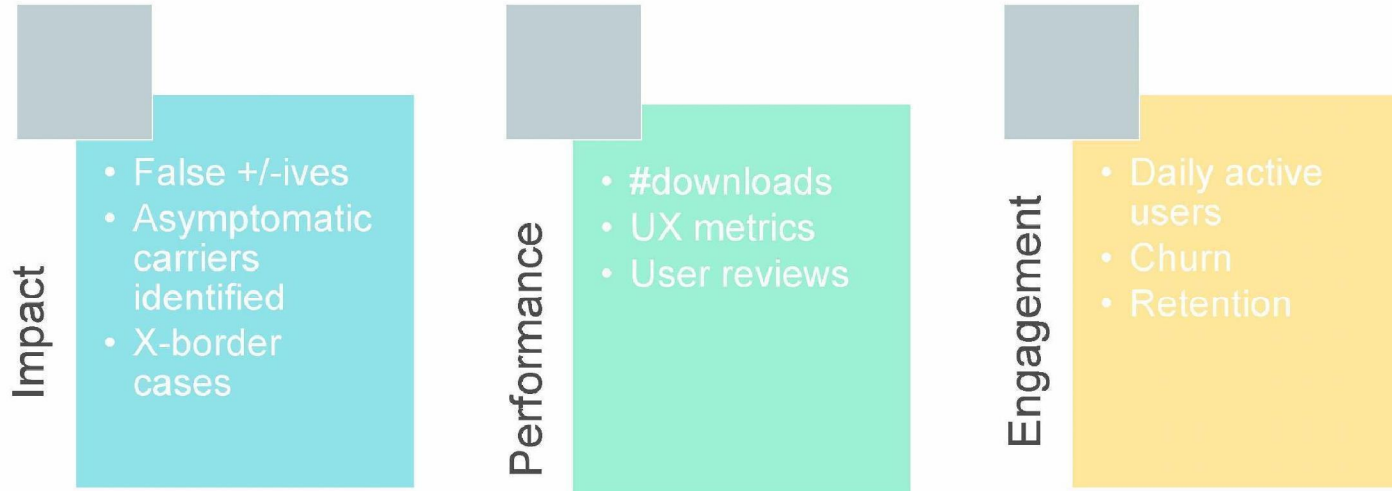### c. Monitoring the effectiveness of the apps

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 in-depth 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.

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Annex I – Suporting Actions

SUPPORTING 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)

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Assessing apps effectiveness: KPI examples

Impact

- False +/-ives
- Asymptomatic carriers identified
- X-border cases

Performance

- #downloads
- UX metrics
- User reviews

Engagement

- Daily active users
- Churn
- Retention

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Thank you

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