The WHO-FIC Network

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WHO-FIC Network

Introduction

WHO as proprietor of a range of health classifications holds valuable intellectual property of high value for member states and the international statistical community. The classifications now form a Family of International Classifications (WHO-FIC). Other classifications may be included in the WHO-FIC as related or derived members. The principles underlying WHO-FIC are similar to those supporting the UN Family of Classifications, and the reference classifications within WHO-FIC (ICD and ICF) form part of the UN Family. A WHO-FIC strategy and work plan are in place.

Over the period since 1970, WHO has designated a number of collaborating centres to work with it in the development, maintenance and use of health classifications. The collaborating centres have met annually.

Increasingly the centres and the WHO are progressing their work through committees, which conduct their business outside the annual meetings of collaborating centres. These committees report to the annual meeting.

WHO and the collaborating centres now recognise that the interactions are best characterised as a collaborative network (WHO-FIC Network).

This paper describes the characteristics of the WHO-FIC Network including its:

- membership
- purpose
- governance
- committee structure

Membership of the WHO-FIC Network

WHO has sought to include a wide range of capacities within the collaborating centre network. Although the centres have generic terms of reference, they represent different geographic regions, and many centres specialise in a key language. Inevitably, as the spread of collaborating centres has grown, there has been an increasing disparity in the skills and resources across the network and recognition that mutual support among members is essential.

A premise of this paper is that the spread of collaborating centres must continue to grow, in particular in the AFRO, SEARO and EMRO regions. WHO Regional offices can assist in representing the interests of regions where collaborating centres currently do not exist and should contribute to establishing new centres as needed. Potential centres do not need to be expert in all aspects of WHO-FIC at the outset, and specific development plans may need to accompany their accession to collaborating centre status. Provision of
necessary skills to assist this development needs to be a specific responsibility of the Network.

Countries not associated at present with a Collaborating Centre may participate in, and seek support from, the Network. The WHO-FIC Network includes all designated WHO-FIC collaborating centres, the responsible area of WHO Headquarters and all Regional Offices. Each collaborating centre nominates a centre head acceptable to WHO.

**Purpose of the Network**
The Mission Statement of the WHO-FIC Network is to develop, disseminate, implement and update the WHO-FIC to support national and international health information systems, statistics and evidence. In fulfilling this mission, the Network has these broad purposes:

- To promote the development of WHO-FIC, so that high quality classifications are available for all relevant sectors of the health system, and that gaps are filled according to priorities agreed within the Network.
- To assist the timely and appropriate use of WHO-FIC classifications across member states by ensuring, in conjunction with the relevant Regional Office, that classifications are actively disseminated, implementation tools are available and that necessary education arrangements are developed and delivered.
- To ensure that WHO-FIC member classifications are updated as required and that the need for a major revision of WHO-FIC members is identified and appropriately addressed.

**Governance of the Network**
The Network is governed through the annual meeting of collaborating centres with WHO headquarters and regional offices. The annual meeting shall be co-chaired by the head of the collaborating centre who is hosting the meeting and the Chair of the Planning Committee. Major decisions may need to be referred to WHO governing structures for endorsement. Where a decision needs the involvement and/or consent of another WHO area, the WHO Network member will seek the necessary agreement in a timely fashion.

Between annual meetings, the Network's Planning Committee will act as an Executive group, but will refer any major matter to all members of the Network for endorsement.

**Committee Structure of the Network**
The WHO-FIC Network has established six committees. The number and roles of committees will be reviewed from time to time. The aim will be to restrict the number of committees to a minimum. The annual meeting may establish time limited working groups to carry out a specific task, and these
will generally be placed within one of the established committees. Figure 1 illustrates the relations between the committees and the WHO Secretariat.

**Figure 1  Relations between WHO-FIC Committees**

The **Planning Committee** will conduct the business of the Network between annual meetings. It will monitor progress of the work program and plan the annual meeting.

The Planning Committee comprises an elected Chair, the heads of centre responsible for the most recent annual meeting, the next annual meeting and the following annual meeting, plus the Committee Chairs. In addition WHO headquarters will be a member of the committee.

The Chair shall be elected at an annual meeting of the Network for a term of two years. The Chair of the Planning Committee will assume the office at the conclusion of the annual meeting at which he/she is elected. A Vice-Chair may also be elected on the same basis as the Chair.

The remaining committees each take responsibility for progressing a broad area of the work program of the Network. Any member of the Network may participate in these committees, The annual meeting will seek to ensure sufficient participation in each committee to enable it to conduct its assigned work program.

The **Family Development Committee** aims to ensure that the WHO-FIC has a logical structure so that the classifications needed for each component and setting within the health system can be identified. The Committee identifies and prioritises gaps in the WHO-FIC. It sets criteria for and assesses potential new member classifications against these criteria. As necessary, the
Committee will work with proprietors of classifications that could fill a gap in the WHO-FIC, and will recommend appropriate relationships between WHO and the proprietor. The Committee may also recommend strategies for revision of WHO-FIC members, but the revision itself would be undertaken within the Updating Committee or through a specific purpose group.

The **Implementation Committee** encourages the adoption and use of WHO-FIC members within WHO and member states. It assists and advises the WHO-FIC Network in improving the level and quality of use of the WHO-FIC classifications in member states, with a principal focus on the reference classifications. It develops necessary tools to assist this process. The Committee may develop short versions of classifications where this is necessary to promote use.

The **Education Committee** develops and promotes an education strategy for the WHO-FIC, identifying best practices and providing a network for sharing expertise and experience on education. The first priority is for the reference classifications, ICD and ICF. The Committee may cooperate with other groups to achieve its aims.

The **Updating & Revision Committee** assesses the need for updating of WHO-FIC members and develops detailed proposals for annual meetings. It fosters reference groups for specific areas of interest and addresses issues brought forward by reference groups, The Committee may identify where major revision is required and how such a revision could be undertaken. Once a revision is approved by the Network, the Committee may undertake or direct the revision work. The Updating Committee includes a Mortality Reference Group to address the need to clarify mortality coding rules and to recommend new rules and codes to meet the needs of mortality statistics.

The **Electronic Tools Committee** determines the need for electronic availability of WHO-FIC classifications, and how appropriate systems can be put in place. The Committee aims to ensure available tools can be, and are, shared across users.

See attachment for the Terms of Reference of the Committees.