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Executive Summary

The vaccine world is changing and with it the demands and expectations of the research community, donors, global and national policy makers, and other interested parties. These changes include new vaccine development, technologies, optimizing programmes, vaccine safety issues, the regulation and approval of novel vaccines (including prequalification of vaccines for use by United Nations agencies, and increased funding flowing through new financing mechanisms). Such changes place a special responsibility on WHO to respond effectively. The future, as envisaged by the WHO and its UN partner, UNICEF, is described in the GIVS (2006-2015) and in the mid-term strategic plan of IVB.

Given this dynamic environment, it is timely that the IVB has asked for a review of its advisory structures, which is the subject of this report. The purpose of the review has been to examine the committee advisory structure supporting and serving the IVB, to determine the most essential and important elements, and to make recommendations where possible for more efficient operations in the future.

Altogether, 24 committees were originally identified for the review team as serving IVB in an advisory role. Most are standing committees, some are time-limited. Approximately one-half serve the research function of IVB and have a highly scientific and technical focus. While all these advisory committees serve crucial functions, the review team (RT) concluded that there is a lack of overarching policy and systematic communication channels to provide a framework for optimal articulation and functioning of IVB advisory committees (ACs).

The modus operandi of the RT has been to analyze the current situation, and to conduct a series of interviews - 18 internal and more than 28 external, as well as a round table consultation. In this way opinion and experience were solicited both within the department and outside it from interested partners.

The RT aimed to achieve the following:

- simplification of the present advisory committee structure;
- clarification of logical lines of reporting, advice and information exchange within IVB, and onwards to the DG of the WHO;
- definition of the elements necessary for the successful operation of committees, including proper terms of reference (TORs) and regular review of their functions and activities;
- an exploration of the central and critical role of SAGE, and of both the merits and weaknesses of the current practices of SAGE insofar as they might affect the optimal role of ACs; and,
• identification of cross-cutting issues that influence the efficient operation of the advisory committee system within IVB.

Figure 1 on page 12 depicts the proposed advisory committee structure and reporting lines.

As part of its work, the RT identified a set of elements and characteristics that it regards as essential for the effective operations of an advisory committee.

The RT noted that SAGE has a central and overarching role in the effective operations of the advisory framework serving IVB. The TORs, expectations, limitations, merits, and envisaged strengthening of SAGE proposed by the RT for this particular purpose are referred to in the body of the report.

The RT also noted that no accepted and consistent definition of an advisory committee exists within IVB, or indeed within WHO. The RT report proposes that this be addressed and has suggested a definition in the report.

In the conduct of its review, the RT identified a number of cross-cutting issues common to most, if not all, of the advisory committees of IVB. These are as follows:

• The need to strike a balance between addressing and taking care of conflicts of interest on the one hand, and consulting with and including the best available people on the other, when such people may have a conflict of interest either through their academic work and consultancies, or though affiliation with industry;

• The importance of balancing protection of institutional and committee memory in committees and retention of the best expertise available, on the one hand, against the imperatives of changing static membership and refreshment, on the other, and promoting and expanding competence in highly technical and specialized areas covered by advisory committees.

• The critical position of research and evidence in the work of IVB, and the necessity of appropriate committee structures and practices to inform the research arm of IVB.

• Participation of developing countries in the advisory committee structures, both for the insights that committee members from such countries bring and for capacity development.

• Inclusion of the regions in the advisory committee system to enhance the relevance and credibility of ACs.

• Need for clearer communication and better defined reporting channels between committees.
In making its recommendations, the RT considered the following to be of importance:

- identification and consolidation of functional groupings;
- ensuring coherence of recommendations made by the RT with the GIVS, and with the departmental strategic plan;
- identification and articulation of the elements of success and failure for an AC, and of the characteristics of the ideal committee; and
- simplifying the current advisory committee structure while recognizing that there are some gaps where the creation of new ACs might be useful, or where it may be necessary to expand the present scope of some extant committees.

In pursuing its task, the RT did not:

- Comment in detail on the TORs and justification of each of the 24 committees;
- Consider changes to the present chain of command and reporting structures within IVB; or
- Attempt a cost-benefit analysis of the present committee structure and operations, since insufficient data made such an exercise impossible.

Based on its deliberations and findings, the RT recommends as follows:

1. That IVB affirm the critical value and importance of the advisory committee structure as an effective means of obtaining expert advice and achieving a credible basis for policy making.

2. That the revised advisory committee structure and relationships depicted in the organogram (page 17) be adopted.

3. That SAGE be recognized as the key committee which reviews and/or makes recommendations to the Director-General of WHO on all aspects pertaining to immunization policies.

4. That SAGE and its working groups be adequately supported in order to meet the expectations placed upon it, including and especially the need for SAGE to have the necessary multidisciplinary expertise.

5. That a much stronger connection be established between the regional TAGs and SAGE (along with the rest of the IVB advisory structure). Immediate steps should be taken in this regard that would include strengthening of the regional TAGs.
6. That a definition of an advisory committee be determined by the department and adhered to.

7. That IVB adopt, for general application, the proposed criteria for a sound and effective committee; and that committees presently in existence that do not meet these specifications should be either upgraded or discontinued.

8. That the creation of three new ACs be considered to address the necessary issues of Quantitative Implementation Research, Regulatory Affairs (including the prequalification of vaccines), and Technologies.

9. That IVB should implement a comprehensive communication strategy [along the lines set out in Annex 8).

10. That the independence of advisory committees be affirmed as essential for their success, including the independence of committees from donors and from the advocacy functions of WHO itself.