Draft Terms of Reference
Technical Advisory Group for NTD Diagnostics

I. Background and Rationale

The WHO Department of Control of Neglected Tropical Diseases manages a diverse portfolio of around twenty diseases, each with its own unique epidemiology and diagnostic challenges. Programmes to address each of these diseases may have the goal of disease control, elimination as a public health problem, elimination of transmission, or eradication; and the programmatic goal may change over time as new tools are developed and global attention brings in increased support. Recognition of the achievements accomplished on the road to 2020 and enthusiasm generated by the setting of the Sustainable Development Goals for 2030 have resulted in new momentum for consolidating programme gains and accelerating progress towards programme endpoints. In view of the need to support programmes to successfully deliver needed health interventions to vulnerable populations and demonstrate and maintain the health gains achieved, the Department has determined, in agreement with external evaluations, that it is critical to reassess the needs and access related issues around diagnostics across all the diseases in its portfolio.

Despite the diversity of disease programme goals, there are commonalities across programmes that lend well to the establishment of a single working group for diagnostics. Programmes, depending on their goal, may need diagnostics for case detection, diagnosis, prognosis, mapping of endemicity, monitoring and evaluation, test of cure, making the decision to stop mass treatment, determination of infectivity, and/or surveillance. A single WHO technical advisory group (DTAG) for NTD diagnostics supported by ad hoc use-case sub-working groups will help ensure that a harmonized approach is used to identify and prioritize diagnostic needs and advice WHO strategies and guidance on the subject.

II. Role and functions of the NTD DTAG

- Provide advice to the Department on priorities for new diagnostic tests for NTD programmes
- Identify ideal performance characteristics of diagnostics specific for the stage of the NTD programme
- Develop target product profiles for priority diagnostics in collaboration with appropriate NTD experts
- Provide advice on and support the development of NTDs diagnostic position statements
- Identify key issues and challenges regarding access to NTD diagnostics and proposes strategies, advices and directions to address them.
III. Membership

The NTD Diagnostics Technical Advisory Group (DTAG) shall comprise 12 members, who shall serve in their personal capacity and represent a range of disciplines. The composition should strive for appropriate geographic representation and gender balance.

Members will be acknowledged experts from all regions of WHO in the fields of epidemiology, public health, infectious diseases, microbiology, health systems, management, regular authorities. Members shall be appointed by the Director, NTD in consultation with regional offices and other departments as deemed necessary. The members, including the chairperson shall be appointed to serve for an initial term of four years. Such four-year term may only be renewed once for a period of up to an additional 3 years. Prior to being appointed as members and renewal of term, nominees & members are required to complete a WHO Declaration of Interest and other Guidelines development related formalities. Other technical experts may be invited as needed according to the needs of the agenda.

In addition, members are required to sign confidentiality agreements prior to confirmation by WHO of their appointment as DTAG members. All documents presented to DTAG, which may include prepublication copies of research reports, or documents of commercial significance, shall be treated as confidential.

Membership in the DTAG may be terminated by NTD department, including for any of the following reasons:

- failure to attend two consecutive DTAG meetings;
- change in affiliation resulting in a conflict of interest;
- a lack of professionalism involving, for example, a breach of confidentiality.

IV. Working Procedures and Reporting

The DTAG will meet at least once per year and have additional meetings and/or teleconferences as agreed by the Department and the chair of the working group. Decisions or recommendations will, as a rule, be taken by consensus.

Relevant staff from WHO Headquarters and Regional Offices will attend as members of the secretariat.

The DTAG will establish ad hoc use-case or disease specific sub-groups to work and deliver on a clear task, e.g., development of actual use case and Target Product Profiles.

Additional experts, representatives of the specific sub-groups and technical resource persons may also be invited to meetings as co-opted DTAG members by the secretariat with approval of the chairperson, as appropriate, to further contribute to specific agenda items.
However, WHO/NTD may also invite observers that can include representatives from non-governmental organizations, international professional organizations, technical agencies, manufacturers and donor organizations. However, only DTAG members can participate in voting or decision by consensus. Observers shall not take the floor unless requested to do so by the chairperson and shall not participate in the formulation of the DTAG recommendations.

A report of each meeting will be written by an identified rapporteur of the group and the WHO secretariat and approved by the members. It will be presented to the Director of the Department of Control of Neglected Tropical Diseases and will be posted on the WHO website at the discretion of the Director. It may also be presented to the WHO Strategic and Technical Advisory Group for Neglected Tropical Diseases.

V. Life Span/Dissolution of DTAG

The DTAG will remain in place at the discretion of the Director as long as there is need for new NTD diagnostics and other NTD diagnostic issues. The need for the continued function of the DTAG will be reviewed at least every 5 years by the NTD Department.