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Evaluating National Immunization Technical Advisory Groups (NITAGs) performance

Practical tool

V5.1

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BACKGROUND

In line with global calls for increased country ownership of immunization policies, a large proportion of countries established National Immunization Technical Advisory Groups (NITAGs). Enhancing NITAGs' functionality has become a priority and is a marker of countries' commitment to immunization, as stated in the Global Vaccine Action Plan 2011-2020 (GVAP; Strategic Objective 1). NITAGs are independent bodies that aim to advise decision-makers on all immunization-related issues, regardless of target population or age group.

Through the SIVAC Initiative¹ funded by the Bill & Melinda Gates Foundation and Gavi, the Vaccine Alliance, the Health Policy and Institutional Development (HPID) Unit of the Agence de Médecine Préventive (AMP)² supports NITAG establishment, strengthening and networking in collaboration with WHO and partners, since 2008.

NITAG functionality is currently assessed, through the annual monitoring of a set of six indicators, in the WHO/UNICEF Joint reporting form. These indicators are used to monitor progress towards the GVAP 2011-2020 targets. Additionally, a set of 17 process, output and outcome indicators was developed, in 2013 by the World Health Organization (WHO) and SIVAC Initiative to assess NITAG performance. These great attempts to evaluate NITAGs needed to be merged into an integrated approach of NITAG performance that investigates holistically functioning principles and operating processes, as well as its role and impact on national immunization policies.

This approach evaluates NITAGs in their mission of informing immunization policy-making, using a performance definition that considers three dimensions:

- ✦ Functionality: Do NITAG's structure and operations foster the timely generation of recommendations?
- ✦ Quality: Has the NITAG developed formalized and implemented appropriate processes to ensure quality recommendations?
- ✦ Integration: Is the NITAG fully integrated into the decision-making system?

¹ More information is available at <http://sivacinitiative.org>

² The Health Policy and Institutional Development (HPID) Unit of AMP is a WHO collaborating center on evidence informed immunization policy-making.

NOTES TO USERS

This tool provides you with guidance and templates to:

- + Prepare your evaluation
- + Collect data through various sources
- + Analyze information and write the evaluation report

PREPARE YOUR EVALUATION

Preparatory work is required to understand local specificities. Optimal access to all relevant documentation will reduce evaluation timelines.

1. [Agree on evaluation specific objectives and timespan](#), and include them in the evaluator's terms of reference along with your priorities for performance development (if already identified). All performance aspects are weighted equally, but adaptations can be made to meet each stakeholder's specific needs and expectations. To maximize independence and neutrality, an evaluator who is external to the NITAG is recommended. A 2 years timespan is suggested. Contact the SIVAC Initiative for more guidance if needed.
2. [Gather all relevant formal data](#) from official documents on your country immunization (such as the National Immunization Plan/Policy (if any) or Country Multi-Year Plan (cMYP) for countries eligible to GAVI support) and on NITAG (such as official texts, NITAG operating procedures, other functionality-related documents, NITAG past recommendations and their implementation, communication strategy/plan etc....).
3. [Identify relevant stakeholders and agree on the ones to interview](#)

COLLECT DATA using the collection tool with information available from written sources and fill any gaps interviewing relevant stakeholders

ANALYZE INFORMATION AND WRITE THE EVALUATION REPORT: [we provide insights for each level of the analysis in the evaluation report template. Final report should be written in a narrative way.](#)

RECOMMEND ACTIONS to improve NITAG performance, and avoid too prescriptive conclusions.

NB: Under your NITAG confidentiality requirements, the SIVAC Initiative appreciates your feedback on this tool in order to improve future versions, and develop additional NITAG technical support tools.

COLLECTION TOOL

1. Functionality

1.1. Structural viability

F1) Is there a document officially establishing the NITAG?

TYPE AND TITLE OF THE DOCUMENT ESTABLISHING THE NITAG	DATE OF SIGNATURE	SIGNATORIES

If so, does it mention:

Termination of NITAG. <input type="checkbox"/> When? ___/___/_____	Rotation of core members. <input type="checkbox"/> When and how?
Rotation of Chair. <input type="checkbox"/> When and how?	
Rotation of Executive Secretary. <input type="checkbox"/> When and how?	

F2) Are there specific NITAG terms of reference (ToRs)? List the NITAG's ToRs? Has the NITAG fulfilled all its roles over the timespan under consideration? Give at least one example for each assigned role.

F3) Material resources are guaranteed for the NITAG . On which resources does the NITAG's functioning rely? If applicable, list all sources of funding by type of expenses (HR, meetings costs, working groups' costs, consulting fees, members' expenses, communication and other costs)

F4) Has the NITAG faced lack of funding for planned activities over the timespan under evaluation? How has it funded unplanned activities in this period, if any? Elaborate.

1.2. Functional capacity

1.2.1. Formalization of standard operating procedures (SOPs)

If multiple procedural documents exist, name them. Do not answer if the topics of SOPs have not been formally considered by the committee.

F5) The NITAG does have **formalized (written and approved)** Standard Operating Procedures (SOPs) . The NITAG’s SOPs were approved by the committee . All NITAG members received the final version of SOPs .

Check boxes that are addressed by or included in the **formalized** operating procedures. Provide details when needed.

Activity planning procedure <input type="checkbox"/>	Type & number of members, roles, length of mandate <input type="checkbox"/>
Conditions and procedures for nominations/rotations <input type="checkbox"/>	Policy on conflict of interest <input type="checkbox"/>
Policy on confidentiality <input type="checkbox"/>	Secretariat role and functioning <input type="checkbox"/>
Minimum number of meetings per year <input type="checkbox"/> No : ____	Conditions for participation of external parties in meetings <input type="checkbox"/>
Development and validation of meeting agenda and minutes <input type="checkbox"/> Timeline : ____	Procedures related to the circulation of background materials and meeting agenda, including deadlines <input type="checkbox"/> Conditions : ____
Quorum for conducting a meeting <input type="checkbox"/> / making decisions <input type="checkbox"/> Conditions : ____	Formalization/dissemination of recommendations <input type="checkbox"/>

1.2.2. Human resources for performing comprehensive analysis of immunization issues

F6) Members’ nomination procedures were not written in official documents

Are the conditions and procedures for nomination of each type of member clear in the document? Which of them take part in NITAGs decisions?

PROCEDURES AND CONDITIONS FOR NOMINATION CLEAR		PARTICIPATION IN DECISION	
Core members (No.:____) <input type="checkbox"/>	Non-core members (No.:____) <input type="checkbox"/>	Core members (No.:____) <input type="checkbox"/>	Non-core members (No.:____) <input type="checkbox"/>
Chairperson <input type="checkbox"/>	Executive secretary <input type="checkbox"/>	Chairperson <input type="checkbox"/>	Executive secretary <input type="checkbox"/>

F7) The NITAG has at least 5 areas of expertise amongst its core members. What are those? Check all that apply and indicate the number of each.

Pediatrics (children/adolescent) <input type="checkbox"/> (No :)	Infectious Diseases <input type="checkbox"/> (No :)	Health Systems and delivery <input type="checkbox"/> (No : ..)	Epidemiology <input type="checkbox"/> (No :)
Adult / geriatric medicine <input type="checkbox"/> (No :)	Public Health <input type="checkbox"/> (No :)	Clinical Research <input type="checkbox"/> (No :)	Immunology <input type="checkbox"/> (No :)
Health Economics <input type="checkbox"/> (No :)	Other. <input type="checkbox"/> Which one(s)?		

Which areas of expertise are usually relied upon in making recommendations? Did the committee identify any lack of expertise? If so, has it implemented any actions to address this issue? Elaborate.

F8) Provide details on the Chairperson and executive secretary

	CHAIRPERSON	EXECUTIVE SECRETARY
Hierarchically/functionally linked to the MoH ? If yes, which position?		
% full-time equivalent (FTE) working for the NITAG		
Actual role in the NITAG		
Other current position(s)		

F9) Qualify (professional degree, missions to the secretariat) and quantify (%FTE) any supplementary human resources (HR) allocated to the secretariat:

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1.2.3. Independence

F10) The NITAG reports to the MoH. If so, to which department in the MoH does it report to? _____

What are the NITAG's reporting obligations to the MoH?

Establishment of the Work Plan <input type="checkbox"/>	Execution of the Work Plan <input type="checkbox"/>	Execution of Budget <input type="checkbox"/>
Issuing of recommendations (technical issues) <input type="checkbox"/>	Communication with external stakeholders <input type="checkbox"/>	Other. <input type="checkbox"/> Specify:

F11) The NITAG has a policy on conflict of interest . Provide details below.

When is it mandatory to declare potential interests? _____

Were there any conflicts of interest declared in the timespan under evaluation? If yes, specify the position of the people involved and the type of conflict.

Chairperson and deputies <input type="checkbox"/>	Executive secretary and deputies <input type="checkbox"/>	Any NITAG core member <input type="checkbox"/>	Other secretariat technical position <input type="checkbox"/>
Type of Col:			

Potential consequences of declared interests according to the Col policy.

Recusal from preparatory work on a specific topic <input type="checkbox"/>	Recusal from decision on a specific topic <input type="checkbox"/>
Recusal from discussions on a specific topic <input type="checkbox"/>	Termination of membership or contract <input type="checkbox"/>
Other: <input type="checkbox"/> Specify:	

1.2.4. Activity planning and execution

F12) The NITAG developed a work plan (WP). Timespan covered: _____.

Describe the process used to develop the work plan. How long did it take?

Describe the content of the work plan: the strategy and collaborations, its operational and technical contents.

F13) Describe secretariat’s role in the work plan implementation (frequency of meetings, coordination of working groups etc...)

F14) Elaborate on the work plan implementation rate: were all planned activities conducted? Were new ones added or withdrawn?

F15) In the process of making recommendations, the NITAG mandates working groups (WG) to provide deeper analysis of specific subjects. For each WG in the timespan of the evaluation, provide information below. Add rows if needed.

TOPIC	MEMBERS (#)	NITAG MEMBERS	EXTERNAL EXPERTS	FORMED ON	STANDING UNTIL	MANDATE
WG1 [replace by topic]						
WG2 [replace by topic]						

1.2.5. Compliance with operating procedures

F16) NITAG faced difficulties to comply with SOPs. Elaborate below on these difficulties and their consequences. How did the NITAG deal with them?

AREAS IN NITAG OPERATIONS	COMMENTS
Human resources: availability, involvement, expertise, capacity...	

AREAS IN NITAG OPERATIONS	COMMENTS
Independence: reporting obligations, role of decision-makers and stakeholders	
Policy on Col: comprehensiveness, implementation, impact	
Activity planning: involvement of stakeholders, completion, consideration of national/regional priorities...	
Activity execution: compliance to work plan, circulation of documents, recommendation-making/issuing, working groups	
Other:	

1.3. Productivity

F17) Which topics did the NITAG address during the timespan under evaluation? What was the result? (You will need to come back to this list later on).

TOPICS ADDRESSED BY THE NITAG	INCLUDED IN THE PLANNING?	WORK PERIOD (DATES OF 1 ST AND LAST MEETINGS)		RESULT (IN PROGRESS, SHELVED, DISCARDED, RECOMMENDATION ISSUED*)
	<input type="checkbox"/>			
	<input type="checkbox"/>			

**Recommendation is any formalized opinion issued by the NITAG. Thus, discussions on one topic may lead to issuing several recommendations for immunization policy.*

List titles of recommendations issued by the NITAG in the timespan under evaluation.

F18) Which of the topics above were part of the NITAG’s workplan? Did they meet national/regional priorities?

F19) How consistently did the NITAG issue its recommendations following expected timelines? What were the main causes for delays?

Did the MoH make any urgent requests? Which ones and what motivated them (emerging risks, outbreaks etc.)? What were the timelines? Was the NITAG able to respond on time? If not, what were the consequences?

Has the consideration of urgent issues affected execution of the regular workplan? Could this have been avoided? How?

2. Quality of NITAG processes and outputs

2.1. Secretariat and NITAG capacity

Q1) Human resources (HR) in the secretariat have technical skills to support the process of making recommendations.

Literature search <input type="checkbox"/>	Systematic reviews <input type="checkbox"/>	Assessment of the quality of evidence <input type="checkbox"/>
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Q2) There are opportunities for NITAG members to improve their ability to use scientific evidence to inform policy recommendations. Describe those opportunities and who benefited from them?

TYPE OF OPPORTUNITY	TOPIC AND ORGANIZER	MEMBERS INVOLVED (#, TYPE)
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TYPE OF OPPORTUNITY	TOPIC AND ORGANIZER	MEMBERS INVOLVED (#, TYPE)
Technical trainings: Evidence-based methodologies; Health economics/economic evaluation etc...		
Other: Study tours; experience sharing		

Q3) The NITAG is able to access external technical expertise as needed to address specific issues. Check the ones available to your NITAG.

Academic researchers <input type="checkbox"/>	Government agency staff <input type="checkbox"/>	International organization staff <input type="checkbox"/>	Pharmaceutical industry representative <input type="checkbox"/>	Independent consultants <input type="checkbox"/>
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Q4) If the NITAG tapped into any of the categories above in the timespan under evaluation, describe conditions, mandates and results of collaboration. If the NITAG could not access external expertise, specify limitations (SOP, financial resources etc).

Q5) If the NITAG mandated working groups (WGs) to work on specific subjects in the timespan under evaluation, provide details on i) what drives the establishment of WGs; ii) the process to establish them and nominate their members; iii) their mandate (formal written terms of reference); iv) their coordination and functioning; v) modalities of reporting of WG work to the NITAG.

Q6) The NITAG has access to scientific data on immunization (medical and others). Elaborate on how the committee has access to it. List if appropriate, databases that are regularly used.

Q7) The NITAG has access to national data. Be specific on the source.

2.2. Quality of the analytical process

Q8) The NITAG/WG applies a specific framework to define the policy issue and related scientific question(s). If so, who is responsible for defining questions under analysis? Describe methods applied, including how systematically it is used.

Q9) The NITAG applies a framework to select the type and relative importance of data to consider in the analysis. If so, describe its general characteristics.

Check the type of data considered by the NITAG in its recommendations and elaborate on its frequency and conditions for inclusion.

Efficacy and effectiveness <input type="checkbox"/>	Safety <input type="checkbox"/>	Vaccine characteristics and indirect effects <input type="checkbox"/>	Burden of disease <input type="checkbox"/>	Use and cost of healthcare <input type="checkbox"/>
Alternative preventative measures <input type="checkbox"/>	Budget considerations (affordability and sustainability) <input type="checkbox"/>	Economic evaluations (cost, cost-effectiveness) <input type="checkbox"/>	Health policy and programmatic issues <input type="checkbox"/>	Acceptability and equity <input type="checkbox"/>
Others <input type="checkbox"/> Specify :				
Frequency and conditions for inclusion:				

Q10) The NITAG has a framework to guide scientific data collection. Which types of studies are included and how are they prioritized (primary vs. secondary sources, systematic reviews vs. narrative reviews, published vs. gray literature)? Does the NITAG use systematic reviews? Elaborate.

Q11) NITAG/WG assesses the quality of the evidence collected. Describe how this is done

Results of evidence analysis are consistently synthesized , shared with all NITAG members ahead of the meetings and discussed in NITAG meetings
 Source documents are made available.

Q12) Describe the process used to establish a recommendation: evidence analysis and plenary discussions, mode of decision (consensus or voting) and final cut of recommendation.

Q13) Do described frameworks and processes apply to both urgent and non-urgent issues? If not, explain the difference.

2.3. Quality of outputs

Q14) The NITAG issues recommendations in the form of “recommendation notes” that summarize NITAG work and address technical question(s) posed.
 Recommendation notes follow a standard plan or template. Check the type of information found in them.

1. Contextual information and policy question <input type="checkbox"/>	2. Method applied to frame the question, collect and analyze data <input type="checkbox"/>
3. Method applied to reach recommendation <input type="checkbox"/>	4. Assessment of proposed intervention and its outcomes (e.g. effectiveness, impact) including a description of the quality of evidence <input type="checkbox"/>
5. Assessment of other data considered in the framework, with a description of the quality of evidence <input type="checkbox"/>	6. Recommendation itself (based on existing evidence) <input type="checkbox"/>
Other sections/ comments:	

3. Integration into the immunization decision-making system

3.1. Transparency

11) The following NITAG governing policies are available to external parties and the general population, through the Internet and official gazettes .

i) Policy on confidentiality: to external parties <input type="checkbox"/> to general population <input type="checkbox"/>	ii) Policy on Col: to external parties <input type="checkbox"/> and to general population <input type="checkbox"/> .
iii) Functioning principles (nomination, member terms, agenda setting, voting) and working processes (SoPs, frameworks, WP): to external parties <input type="checkbox"/> to general population. <input type="checkbox"/>	

If such information is not directly accessible but could be provided under request, specify the procedure and NITAG response timelines.

12) Non-members may participate in NITAG activities. Check which activities. Describe and elaborate on conditions and roles.

Activity planning <input type="checkbox"/>	NITAG meetings <input type="checkbox"/>	Working groups <input type="checkbox"/>
Specify:		

13) Did any stakeholder raise concerns about the contents of recommendations and committee’s work processes? If so, provide details.

3.2. Interactions with decision-makers and other national stakeholders

3.2.1. Communication and dissemination strategies

14) Describe any interactions with MoH specifying frequency, channel and person in charge. Specify if this relies upon formalized documents. Which aspects do they cover (national immunization agenda, NITAG activities, recommendations and follow-up on acceptance)?

NITAG consistently disseminates its recommendations to the MoH . This relies upon formalized documents . Specify the frequency, timelines, channel, format, person in charge and recipient(s).

15) NITAG interacts with other external stakeholders and the general population . This relies upon formalized documents . Specify below if appropriate.

STAKEHOLDER	COMMUNICATION OBJECTIVES	STRATEGY (FREQUENCY, TIMELINES, CHANNEL, FORMAT, PERSON IN CHARGE, TARGETED AUDIENCE)

If no direct interaction exists, explain why and elaborate on how they learn about NITAG recommendations.

16) If communication objectives and strategies have not been formalized, how does the NITAG set targets, formats and channel for communication?

3.2.2. Collaborations and antagonisms within the immunization decision-making environment

17) List national immunization stakeholders collaborating with the NITAG. Describe these collaborations; list and elaborate on the important missing collaborations.

18) Describe the relationships and collaboration between NITAG and the main national institutions providing scientific data. Are there difficulties obtaining such data? Detail a relevant recent case.

19) Are there any “real” or “perceived” antagonisms between NITAG and other institutional stakeholders with respect to their mandate?

110) Is NITAG part of national VPD surveillance data quality review process? Elaborate.

3.3. Acknowledgement by national parties

111) National parties know existence and role of NITAG: decision-makers , other consultative stakeholders , immunization implementers , general population .

112) Referring to F14, which NITAG recommendations were accepted? Have they been implemented?

RECOMMENDATION	ACCEPTANCE DATE	COMMENTS ON IMPLEMENTATION

RECOMMENDATION	ACCEPTANCE DATE	COMMENTS ON IMPLEMENTATION

I13) Elaborate on relevant situations where a recommendation issued by the NITAG influenced a decision taken previously by the MoH.

I14) Elaborate on situations where NITAG members or spokesperson were called upon as resource to respond to a crisis, media query or public debates.

I15) Do health professional associations, schools or other organizations contribute to the dissemination of NITAG recommendations? Provide examples.

I16) Describe how other stakeholders acknowledge the value of NITAG work.

EVALUATION REPORT TEMPLATE

This template proposes a report structure and guidance to analyze collected data and present results. Remember to delete the guidance information provided and report your results in a narrative fashion.

1. Contextual information

This section should include information on the:

- + Country's general context: focus on information that helps understand the functioning of the national immunization program (NIP) and the immunization decision-making process.
- + National immunization program (NIP): structure, functioning funding, and main results. i) age groups covered and vaccines included ii) any changes to the immunization schedule during the timespan under evaluation iii) any future changes in which NITAG could play an important role.
- + National immunization decision-making process: MoH structure, immunization-related services, identification of immunization issues and processes used to solve them. Insist on the official positioning of the NITAG in the immunization environment (other existing immunization committees; professional associations/organizations; patients' or users' representative bodies etc....)

2. Evaluation objectives

*The general objective of this evaluation is to measure the global performance of the **[replace by country name]** NITAG in informing immunization policy-making during the past **[replace by the timespan under evaluation]**.*

Specific objectives: list and describe the specific objectives of your evaluation.

3. Methods

- + Describe briefly: i) who commissioned and who implemented this evaluation ii) if they are external or internal to the NITAG iii) their collaboration with the SIVAC Initiative.
- + Describe the types of data used specifying written data sources and the rationale behind the choice of your interviewees.
- + Describe how you gathered and analyzed data. Explain (if applicable) how you managed potential contradictions between written data and data obtained from interviews, as well as contradictions between interviewees.
- + Specify if you relied too much on one type of source and explain the potential consequences on results.

4. Results

4.1. Functionality: do NITAG’s structure and operations foster the timely generation of recommendations?

ASPECT	INSIGHTS FOR ANALYSIS
Structural viability (F1-F4)	<p>A document legally establishing NITAG ensures the committee’s stability over time and through political/administrative changes. Analyze any existing risk related to forthcoming rotations and/or termination.</p> <p>Consider the immunization environment as a whole and NITAG’s ToR within it; all advisory responsibilities should be analyzed.</p> <p>Allocation of a specific NITAG budget helps ensuring its continuity; this includes in-kind resources. Consider financial risks, balance and actions taken or needed to ensure budgetary independence including the case of urgent/ unplanned requests.</p>

ASPECT	INSIGHTS FOR ANALYSIS
Functional capacity (F5-F16)	<p>Analysis shall highlight if formal operating procedures have been adopted and NITAG difficulties to comply with them.</p> <p>Analysis should compare findings on membership, expertise availability and secretariat/ chairmanship, to WHO guidance³ (NITAGs should have core- and non-core members, with distinct roles, at least 5 expertise areas represented, with potentially external experts co-opted in working groups).</p> <p>Provide an analysis of MoH and stakeholders' influences, given that NITAG should keep sufficient autonomy in its activities.</p> <p>The NITAG's work plan should mention all relevant activities and themes to be addressed, as well as other activities such as trainings. If a work plan exists, analyze its implementation as well as facilitating factors.</p> <p>If no work plan exists, provide an analysis of related causes and risks to NITAG functionality.</p> <p>Failure to plan activities could potentially result in exclusion of the NITAG from important policy issues. Identify potential causes of deviation from the work plan (e.g. difficulties managing human resources, changing priorities).</p> <p>Analyze the committee's level of compliance with its SOP, and challenges leading to weak compliance.</p>
Productivity (F17-F19)	<p>Analyze implementation of activities included in the workplan and responses to urgent/ unplanned requests in order to characterise timeliness of response and consistence/relevance with national priorities.</p>

4.2. Quality: has the NITAG developed formalized and implemented appropriate processes to ensure quality recommendations?

ASPECT	INSIGHTS FOR ANALYSIS
Secretariat and NITAG capacity (Q1-Q7)	<p>Analyze NITAG secretariat internal skills to conduct activities, and its capacity to mobilize external expertise through the use of working groups.</p> <p>Consider the added value of trainings in the face of NITAG work plan and needs.</p>

³ Duclos P. National Immunization Technical Advisory Groups (NITAGs): Guidance for their establishment and strengthening. *Vaccine*. 19 avr 2010;28, Supplement 1:A18- 25.

ASPECT	INSIGHTS FOR ANALYSIS
	Consider NITAG challenges accessing data, and its impact on recommendations.
Quality of the analytical process (Q8-Q13)	The use of frameworks to define policy issues and scientific questions, and to issue recommendations, ensures high quality across recommendations. The same methods should be applied to both urgent and non-urgent issues; if not, the distinction between them should be transparently declared. A generic framework is available on the NITAG Resource Center ⁴ .
Quality of outputs (Q14)	The NITAG outputs should transparently synthesize technical analyses into understandable and useful information for decision-makers. Compare briefly a few NITAG recommendations to the SIVAC template for writing a recommendation note ⁵ to illustrate this aspect.

4.3. Integration: Is the NITAG fully integrated into the national immunization decision-making system?

ASPECT	INSIGHTS FOR ANALYSIS
Transparency (I1-I3)	Firstly, analyze how easily external parties can access information on NITAG's structure and processes. How could this influence the committee's recognition by these parties? Also, participation of external stakeholders in NITAG activities increases mutual awareness of each other's roles. It also increases NITAG's credit and confidence.

⁴ *The SIVAC Initiative. Training 3: Technical & scientific capacities of NITAGs - Module A: Evidence assessment methodologies and Module B: Development of an evidence-based recommendation note – Summary for participant. Agence de Médecine Préventive; 2015.*

⁵ *The SIVAC Initiative. Training 3: Technical & scientific capacities of NITAGs - Module B: Development of an evidence-based recommendation note – Summary for participant. Agence de Médecine Préventive; 2015.*

ASPECT	INSIGHTS FOR ANALYSIS
<p>Interactions with decision-makers and other national stakeholders. (I4-I10)</p>	<p>Regarding communication and dissemination strategies (I4-I6), analysis should focus on strengths and weaknesses of existing strategies to increase the awareness of external stakeholders about NITAG work and advisory role. Analysis of strategies' impact to increase confidence in NITAG relevance should be included.</p> <p>Regarding collaborations and antagonisms (I7-I10), analyze how the NITAG access relevant national data and the relationships between NITAG and data providers.</p> <p>Analyze the national situation and how feasible/ beneficial it would be if NITAG was involved in data quality review (as suggested by GVAP). If any antagonism was reported between NITAG and an existing committee, analyze causes and consequences on NITAG work.</p>
<p>Acknowledgement by national parties (I11-I16)</p>	<p>Markers of interest from any national stakeholders should be analyzed as well as the media channel used. Similarly, suggest possible causes for poor acknowledgment from other stakeholders. If the committee has been excluded from any subject under its mandate, analyze causes and consequences.</p> <p>Acceptance of NITAG recommendations is the most direct marker of committee's effectiveness upon immunization policy. Nevertheless, policy decisions are driven by multiple factors. If possible, identify them.</p> <p>NITAG can ideally bridge the gap between decision-makers and healthcare professionals and even the general public; analyze how NITAG is perceived by those groups to identify potential ways to strengthen these relationships.</p>

5.Challenges and recommendations

5.1. Main challenges faced by the NITAG

5.2. Recommendations to improve NITAG performance

ANNEX 1. EVALUATION DIMENSIONS AND QUESTIONS

PERFORMANCE DIMENSION	EVALUATION QUESTION	INSIGHTS FOR ANALYSIS
FUNCTIONALITY	Do NITAG's structure and operations foster the timely generation of recommendations?	<u>Structural viability</u>
		<u>Functional capacity</u> <ul style="list-style-type: none"> • Formalization of standard operating procedures (SOPs) • Human resources for performing comprehensive analysis of immunization issues • Independence • Activity planning and execution • Compliance with operating procedures
		<u>Productivity</u>
QUALITY OF NITAG PROCESSES AND OUTPUTS	Has the NITAG developed formalized and implemented appropriate processes to ensure quality recommendations?	<u>Secretariat and NITAG capacity</u>
		<u>Quality of the analytical process</u>
		<u>Quality of outputs</u>
INTEGRATION INTO THE IMMUNIZATION DECISION-MAKING SYSTEM	Is the NITAG fully integrated into the decision-making system?	<u>Transparency</u>
		<u>Interactions with decision-makers and other national stakeholders</u> <ul style="list-style-type: none"> • Communication and dissemination strategies • Collaboration and antagonisms within the immunization decision-making environment
		<u>Acknowledgement by national parties</u>

ANNEX 2: SELECTED REFERENCES

1. Duclos P. National Immunization Technical Advisory Groups (NITAGs): Guidance for their establishment and strengthening. *Vaccine*. 19 avr 2010;28, Supplement 1:A18-25.
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