REPORT OF THE JOINT WHO US/CDC EXTERNAL EVALUATION MISSION UGANDA NATIONAL IMMUNIZATION TECHNICAL ADVISORY GROUP (UNITAG)

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Executive Summary

National Immunization Technical Advisory Groups (NITAGs) provide country-specific recommendations to political authorities, ministries of health and/or immunization programs. NITAGs are routinely monitored annually within six 6 basic criteria through the Joint Reporting Form. To date, seventeen indicators measuring processes, outputs, and outcomes of NITAGs are used to guide more comprehensive assessments. WHO recommended these assessments be conducted every three years.. Recently the NITAG Maturity Assessment Tool (NMAT) was developed as a planning and evaluation tool. The NMAT is intended to guide, develop, and refine NITAG development and strengthening. The NMAT is used to assess the level of maturity for seven NITAG indicators, as well as the overall maturity of the NITAG. These levels of maturity are beginning, developing, intermediate, advanced, and leading edge. The seven indicators are: establishment and composition, independence and non-bias, resources and secretariat support, operations, making recommendations, integration into policy making process, and stakeholder recognition. The tool is also designed to help prioritize next steps in NITAG strengthening efforts.

The first external assessment of Uganda's NITAG

(UNITAG) was conducted by a joint team from WHO AFRO and U.S. CDC from 24th to 28th February, 2022. The aim of this assessment were to measure the overall maturity of UNITAG, as well as the maturity for each of the seven indicators. The assessment proceeded with interviews of keys stakeholders and a desk review of UNITAG documents. A data collection tool was used to identify which criteria have been met for each indicator; a maturity level was assigned for each indicator and the NITAG overall. A stakeholders meeting was held online on 03rd March, 2022 to reach a consensus on the scoring of each indicator. The UNITAG was assigned developing level of maturity for four indicators. These are: establishment and composition, independence and non-bias, operations and the integration into policy making process. The UNITAG was assigned at intermediate level of maturity for the indicators resources and secretariat support and stakeholder recognition, while for making recommendations, UNITAG is at advanced level . Therefore, the UNITAG was assigned developing level of maturity overall, as and this was validated by the stakeholders consensus meeting.

Established in 2014, the UNITAG has mandate to advise the Ministry of Health on appropriate immunization policies and programs using evidence-based decision-making processes. It is

composed by ten core members appointed by the Uganda Minister of Health. The term of core members is limited to three years renewable once and terms renewal is not staggered. Membership is not open to competition prior to appointment; however, there is the preselection within recognized experts in Uganda National Academy of Sciences (UNAS).

For evidence finding, UNITAG frequently and routinely seeks external expertise for working groups whenever needed. UNITAG's activities are funded by the Ministry of Health, through the Health system Strengthening Support (HSS) funds from GAVI as well as WHO. The work of UNITAG is supported by an experienced secretariat located at the UNAS. The data access is deemed adequate for global and regional level data, however locally available datas may not be reliable. UNITAG holds at least one meeting annually and these meetings became more frequent during the COVID-19 vaccines rollout. Since its establishment in 2014, a process has not been developed for manual of procedure review and revision.
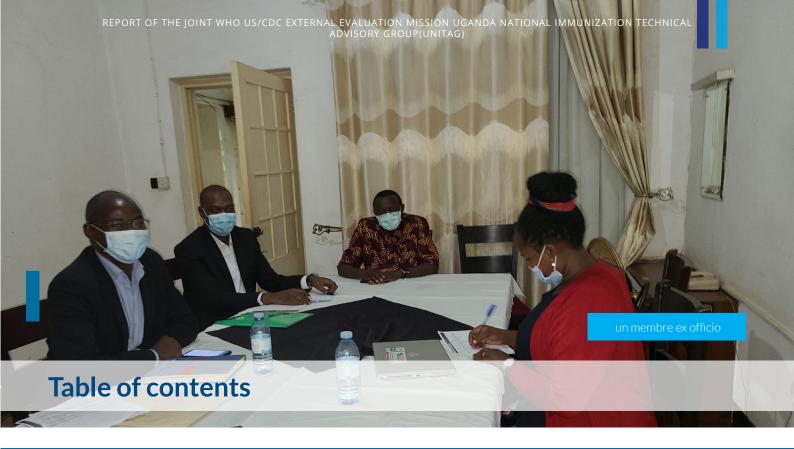
UNITAG receives an official request from the Ministry of Health. For each request, a working groups are established by the NITAG ; and is supported by the secretariat. UNITAG's scientific documentations have experienced a dramatic increase in 2021 and 2022 with fifteen recommendation notes relating to COVID-19 vaccines and vaccination. To date, the recommendations issued by UNITAG are well received by the Ministry of Health. UNITAG meets annually with immunization stakeholders engagement, which gathers members from the NGO forums, immunization partners and health scientific societies. During these meetings, the situation on immunization progress in the country is provided by the UNEPI and NITAG.

The assessment identified the following strengths high political commitment, the solid anchorage in the National immunization decision making process, experienced expertise within members and adoption of standardized evidence informed decision making frameworks. However, some challenges need to be addressed. Such are the delay of the renewing of membership terms, increased workload of secretariat, sustainability of the funding, and the absence of Standard Operating Procedures (SOPs) for Conflict-of-interest assessment and management.

The main recommendations for NITAG improvement based on this assessment relate to the above challenges in particular, strengthen the secretariat support with additional staff. In addition, it is necessary to update NITAG member skills evidence to recommendation process as well as training in vaccinology. Finally, for the sake of the timely implementation of NITAG's annual action plan, it is important to have timely disbursement of funds to the NITAG. For sustainability of UNITAG, the Ministry of Health is encouraged to develop a dedicated national funding budget line UNITAG; which has demonstrated its importance in the landscape of vaccination and decision-making based on evidence.

THESE LEVELS OF MATURITY ARE BEGINNING, DEVELOPING, INTERMEDIATE, ADVANCED, AND LEADING EDGE.

un membre ex officio

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1. Background

National Immunization Technical Advisory Groups (NITAGs) are bodies composed of national independent experts that provide country-specific recommendations to political authorities, ministries of health, and/or immunization programs based on the most relevant evidence available at the national, regional, and global levels. Thus, these advisory bodies contribute to national decision-making on immunization by adapting the World Health Organization (WHO) global and regional guidance to the local context and help to strengthen the credibility and sustainability of the immunization policy and its acceptance by the population. These advisory bodies might also be leveraged as an advocacy group to strengthen immunization stakeholders' engagement in policy design and immunization strategies, as well as for partners supporting these strategies.

At the 58th World Health Assembly (WHA), WHO Member States committed to the establishment and functioning of National Immunization Technical Advisory Groups (NITAGs) in all countries. In the African Region, the heads of states endorsed the Addis Declaration on Immunization (ADI) in June 2017 and the roadmap highlighted the NITAG as an essential body for immunization programs in countries. Furthermore, one of the core principles of the global Immunization

Agenda 2030 is to *"Promote use of high-quality, "fit-for-purpose" data to track progress and drive improvements in program performance and to support decision-making at all levels",* including technical input from bodies such as NITAGs.

NITAGs are monitored annually through the WHO/UNICEF Joint Reporting Form (JRF). Two tools assessing have been previously developed to assess process, output, and outcome indicators of NITAGs. These indicators are assessed, ideally every three years during internal or external evaluation exercises using the WHO/SIVAC or CDC's NITAG simplified assessment tool. Between 2016 to 2018, 14 countries in the WHO Africa Region had conducted NITAG such activities. The NITAG Maturity Assessment Tool (NMAT) was), developed in 2021 by a working group of NITAG subject matter experts. The tool has the integrated the original 17 indicators, as well as other indicators and specific criteria. The NMAT has been developed as a practical planning, monitoring, and evaluation tool to guide NITAG development and strengthening. The NMAT provides NITAGs and partners with a mechanism to assess the maturity of a NITAG and provides a framework for organizing and prioritizing tangible and achievable next steps for NITAG strengthening activities. The NMAT provides measurable steps in NITAG maturity, designed as a logical flow of policies and procedures in place,

to progress from beginning to leading edge.

Since the establishment of the UNITAG in December 2014, no assessment has been conducted either self or external. Following the recommendation from partners, UNITAG solicited WHO to conduct an external assessment. To respond to this request WHO, in collaboration with CDC, implemented an external evaluation using the NMAT from 24 to 28 February 2022.

2. Objectives of the Assessment

The main objective of this external evaluation was to assess the level of maturity of UNITAG using NMAT and provide recommended next steps for UNITAG strengthening.

More specifically, the evaluation was meant to assess seven indicators identified in the NMAT:

- ❯ Establishment and Composition

- ❯ Independence and Non bias

- ❯ Resources and secretariat administrative and technical support

- ❯ NITAG Operations

- ❯ Making Recommendations

- ❯ Integration in Policy Making Process

- ❯ Stakeholder Recognition

3. Methods and tools

In order to respond to Uganda's request to conduct an external evaluation of UNITAG, a team composed of US CDC, Atlanta and CDC Uganda Country office, and WHO AFRO was formed. An orientation on the NMAT tool was organized on February 18, 2022. The field mission was conducted from 24 to 27 February 2022.

The evaluation consisted of desk review of NITAG materials and interviews with stakeholders.

Desk review: the assessment team reviewed the UNITAG's functioning documents, such as the terms of reference, the NITAG manual of procedures (MoP), the recommendation notes from 2017 to 2022, the action plans and activity reports for the last 5 years, meetings reports, and mission reports abroad. In compliance with UNITAG procedures, the assessment team signed the confidentiality form for the meetings minutes which are not disclosed to the public.

Interviews were conducted in person and virtually via a dedicated channel provided by the UNITAG secretariat. The Chairperson of the UNITAG, secretariat staff, four core members, three ex officio members, and a UNICEF immunization specialist were interviewed. A data collection tool with contextual question was used to conduct these interviews and permit identification of what the interview. This was followed by scoring using the NMAT criteria UNITAG has met.

A stakeholders meeting was held online on 03 March 2022, which aimed to reach a consensus on the maturity level assigned for each NMAT indicator and sub indicator and collectively define the next steps for the NITAG functioning improvement

The NMAT has been developed as a practical planning, monitoring, and evaluation tool to guide, develop, and refine NITAG development and strengthening. The NMAT provides NITAG's and partners with a mechanism to assess the maturity of a NITAG and provides a framework for organizing and prioritizing tangible and achievable steps for NITAG strengthening activities. The NMAT provides measurable steps in NITAG maturity, designed as a logical flow of policies and procedures in place, to progress from beginning to leading edge. The tool is used to assess the level of maturity for seven indicators. Each level lays out criteria for the specific indicator assessed. The indicators are establishment and composition; independence and non-bias; financial, administrative, and informational resources; operations; making recommendations; integration into policymaking process and stakeholder recognition. The NMAT have four levels of maturity that are beginning, developing, intermediate, advanced, and leading edge. For each indicator, the appropriate maturity level is the one at which the NITAG meets all of the criteria. If any criteria is checked under the Beginning maturity level, the indicator is assessed at Beginning maturity level. The overall maturity NITAG level assigned is the one lowest level checked for all the seven indicators. The next steps recommended address the criteria to meet the next highest maturity level for each indicator and others recommended next steps are those that address all unmet criteria.

4. Findings

The findings of this external assessment are presented by indicator. The level of maturity of an indicator has been assigned using criteria defined in each sub-indicator. The checked criteria (text in green) was considered as met by the assessment team and validated during the Stakeholders meeting.

4.1. Indicator 1, Establishment and Composition

Table I shows the level of maturity assigned for the indicator: Establishment and composition of UNITAG.

Table I: Indicator I, Establishment and Composition criteria met, UNITAG External Assessment Feb. 2022.

Sub-indicators	Maturity Level				
	Beginning	Developing	Intermediate	Advanced	Leading edge
Official status	☐No official measures or documents have established the NITAG	☒ Official measures or documents have established the NITAG.			
Terms of Reference (TOR)	☐ NITAG lacks written Terms of Reference (TORs).	☒ NITAG has written TORs including a mandate defining scope of work.	☒ TORs address NITAG structure and are shared with members whenever updated. All members aware of TORs	☐ TORs are reviewed at least every 2 years and updated as needed.	

Sub-indicators	Maturity Level				
	Beginning	**Developing**	**Intermediate**	**Advanced**	**Leading edge**
Diversity of Expertise	☐ Fewer than five areas of expertise represented among NITAG members.		☒ At least five areas of expertise represented among NITAG members.	☒ Members' areas of expertise span life course. NITAG has access to additional areas of expertise.	☒ There is a redundancy of experts among members so that all areas of expertise are still represented when absences occur
Membership	☐ There are no practices or processes in place regarding core member voting authority, recruitment, or term limits."	☒ Core members have voting authority, while non-core members do not.	☐ There is open competition for membership spots.	☐ Core member terms are limited and staggered.	
Overall maturity level of the indicator	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☒ Developing ☐ Intermediate ☐ Advanced ☐ Leading edge				

UNITAG is considered at the developing level of maturity for the indicator on establishment and composition.

❯ **Official status**

The Uganda Minister of Health established the NITAG by Ministerial Statement dated December 18, 2014 by transforming the existing Advisory Committee on Vaccines and Immunization (ACVI) following WHO Country office representative communication referenced S2/27/1/13.048 addressed to the ministry of health Permanent Secretariat.

❯ **Terms of Reference (ToR)**

The purpose of the NITAG shall be to advise the policy makers and program managers to make evidence based immunization (all ages, all vaccines) related policy and program decision. The UNITAG has written terms of reference including the mandate which are to enhance the use of evidence-based decision-making processes to establish appropriate immunization policies and programs at national level. The UNITAG broad general terms of reference (ToR) are as follows:

• Conduct policy analyses and determine optimal national immunization policies

• Guide the national government and the national immunization program on the formulation of strategies for the control of vaccine-preventable diseases through immunization.

• Advise the national authorities on the monitoring of the immunization program so that impact can be measured and quantified

• Advise the government on the collection of important disease and vaccine uptake data and information

• Identify the need for further data for policy making

• Guide, where appropriate, organizations, institutions or government agencies in the formulation of policies, plans and strategies for research and development of new vaccines and vaccine delivery technologies for the future.

• All interviewees were on the existence of the ToR and had received a hard copy upon their appointment. The first version of the ToR dating from the creation of UNITAG in 2014 remains unchanged.

◗ **Membership and diversity of expertise**
The UNITAG core members were proposed for the different expertise through the experts within the Uganda National Academy of sciences (UNAS) then a list was sent to the Ministry of Health which officially appointed them. The UNITAG is composed of ten core members appointed by the Uganda Minister of Health, including two clinical experts, one of whom has expertise in epidemiology, two pediatricians with expertise in infectious diseases, two experts in health policy and systems, one expert in vaccinology, an expert in health economics, an epidemiologist/biostatistician ,and a sociologist. The Chair and Vice Chair have been chosen within the core members by their peers.

Thus the UNITAG has a redundancy of expertise in the field of infectious diseases, epidemiology, public health, immunology, and pediatrics which are the basic 5 domains of expertise of constitute a NITAG. Additional expertise are frequently and routinely invited in working groups whenever needed.
The ex-officio members are represented by two officials from the Uganda Expanded Immunization Program (UNEPI). Liaison members are from the civil society, PATH, IOM UNICEF and WHO. Membership is not open to competition prior to appointment, however there is a preselection within UNAS, and experts recognized by peers for their experience in their domain., The mandated term of core members is limited to 3 years and are renewable once; terms are not staggered. Only the core members vote during deliberations.

4.2. Indicator 2, Independence and non-bias.

Table II shows the level of maturity assigned for the indicator independence and non-bias of UNITAG.

Table II: indicator 2, Independence and non-bias criteria met, UNITAG External Assessment Feb 2022.

Sub-Indicators	Maturity Level				
	Beginning	**Developing**	**Intermediate**	**Advanced**	**Leading edge**
Disclosure and conflict of interest process	☐ Declaration of interests (DOI) is not mandatory for core members.	☒ DOI is mandatory for core members upon appointment.	☒ DOI is mandatory for secretariat and working group members. DOIs are routinely updated.	☐ COI policy describes process(es) for assessing and managing COIs.	☒ DOI is mandatory for non-core members.
Transparency	☐ NITAG documentation is not publicly available.	☒ TORs and standard operating procedures are publicly available	☐ Agendas, meeting summaries, and records of decisions are publicly available.	☒ Technical reports and position papers are publicly available ☐ NITAG actively disseminates all publicly available materials, e.g.on its website, through a journal, or via bulletin	☐ Observation of meetings by non-members is permitted upon request or on a scheduled basis, or meetings are broadcast publicly

independence from primary workplace of members	☐ There is no policy in place to ensure members do not promote their primary employer's priorities, views, and/ or products.	☒ A policy is in place to ensure members do not promote their primary employer's priorities, views, and/or products.	☒ NITAG follows a formal, written conflict of interest (COI) policy.		
Overall maturity level of the indicator	☐ Beginning ☒ Developing ☐ Intermediate ☐ Advanced ☐ Leading edge				

UNITAG is considered at the developing level of maturity for the indicator on Independence and non-bias.

❯ **Disclosure and conflict of interest process**
The UNITAG manual of procedure describes the declaration of interest policy. Thus the declaration of conflict of interest is mandatory upon the appointment for both core members and non-core members of the UNITAG. This declaration of conflict of interest is regularly updated in hard copy before each meeting of working groups and UNITAG regular meetings and archived by the secretariat. During 2021 and 2022, where meetings became virtual due to the COVID-19 pandemic, the declaration of COI are done through the chat of communication platform used and are archived through the meeting records. The assessment of the COI are not explicit regarding the "how" and "by whom" these statements of conflict are evaluated and managed.

❯ **In terms of transparency**
Even if all the documents of UNITAG are not public; it has a window in the UNAS website. Within which, the elements of the ToR are found as well as certain elements of procedures and the notes of recommendations until 2017. According to the standard of procedures, the minutes of the meetings of the UNITAG are confidential and are therefore not available to the general public.

❯ **Independence from primary workplace**
According to the ToR UNITAG is an independent body and it was gathered in the interviews that all core members of the NITAG are independent and all come from institutions external to the Ministry of Health.

4.3. Indicator 3, Resources and Secretariat support

The table II shows the level of maturity assigned for the indicator Resources and Secretariat Support of UNITAG

Table III: indicator 3, Resources and Secretariat support criteria met, UNITAG External Assessment Feb 2022.

Sub-indicators	Maturity Level				
	Beginning	**Developing**	**Intermediate**	**Advanced**	**Leading edge**
Secure funding	☐ There is no guarantee of funding and/or guaranteed funding cannot cover basic operational costs.		☒ A guarantee of funding is in place covering basic operational costs.	☐ Guaranteed funding is robust.	☐ Guaranteed funding can cover travel expenses for national and international activities related to NITAG strengthening (regional or global NITAG meetings, collaborations, training)
Access to relevant data and other necessary tools	☐ NITAG has inconsistent access to regional and global information; no access to local information	☒ NITAG has adequate access to regional and global information but inconsistent access to local information	☒ NITAG has consistent and comprehensive access to global and regional information, as well as adequate access to local information	☐ NITAG has consistent and comprehensive access to reliable local, regional, and global information.	☐ NITAG has access to raw data.
Access to external technical expertise and capacity building tools	☐ NITAG does not solicit or accept input from external experts.	☐ NITAG rarely solicits or accepts input from external experts.	☒ NITAG routinely obtains ad hoc input from external experts	☒ As appropriate, NITAG formalizes relationships with external experts through non-core membership	
Secretariat support	☐ There is no officially appointed Secretariat to support the NITAG.	☒ Secretariat provides active administrative support.	☒ Secretariat provides basic technical support.	☒ Secretariat is able to conduct and/ or outsource advanced analyses	☐ Secretariat has multiple full-time staff members with a mix of skill sets.
Overall maturity level of the indicator	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☒ Developing ☒ **Intermediate** ☐ Advanced ☐ Leading edge				

UNITAG is considered at Intermediate maturity level for the indicator resources and secretariat support.

> **Secure funding**
UNITAG had funding of its activities through the Bill and Melinda Gates foundation via SIVAC until 2017. After that, the Ministry of Health and WHO, respectively through the Health System Strengthening Support and GAVI TCA grants have funded UNITAG activities. The various activities financed are working group meetings, ordinary UNITAG meetings, support for the secretariat, as well as the participation of members in vaccinology courses and others international meetings.

> **Access to data**
Data access is deemed adequate for global and regional level data, however locally available data may not be reliable as well as raw data are not accessible to UNITAG.

> **Secretariat support**
Data gathering, appraisal and synthesis process is supported by the secretariat located in the UNAS and composed by two half time dedicated public health researchers, as well as the administrative supports. If needed the UNITAG regularly solicits and obtains external inputs from in-country expert, WHO regional and headquarters.

4.4. Indicator 4, Operations

Table IV shows the level of maturity assigned for indicator operations of UNITAG

Table IV: Indicator 4 operations criteria met, UNITAG External Assessment Feb 2022.

Sub-indicators	Maturity Level				
	Beginning	**Developing**	**Intermediate**	**Advanced**	**Leading edge**
Meeting Logistic	☒ NITAG meets less than annually.	☐ NITAG meets at least annually.	☒ Agenda and background documents are circulated at least one week before meetings.	☒NITAG members are invited to suggest agenda items for secretariat review.	☐Background documents are comprehensive.
Manual of procedure	☐ Standard operating procedures (SOPs) are not formalized in a Manual of Procedures (MoP)	☒ SOPs are formalized in a basic MoP	☒ MoP includes COI policy and budget	☐ MoP includes recommendations and tools for orienting and evaluating members. Orientation includes review of MoP.	☐MoP is regularly reviewed, updated as needed, and updates are promptly circulated to all members.

Evaluation	☐ There is no system for evaluating the NITAG	☒ NITAG is evaluated, but without a regular schedule or standardized tool.	☐ NITAG is regularly evaluated using a standardized tool		
Overall maturity level of the indicator	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☒ Developing ☐ Intermediate ☐ Advanced ☐ Leading edge				

UNITAG is considered as developing level of maturity for the indictor Operations.

❯ **Meeting logistic**
UNITAG held at least one ordinary meeting over the last 3 years. During 2021, coinciding with the start of the COVAX initiative, the NITAG COVID-19 vaccines working group met every Thursday morning to respond to the increased requests from the Ministry of Health as well from the Strategic Policy Committee of COVID-19.
The documents and the agenda of the meetings are shared at least one week before the meetings of the working groups and the statutory meetings of the NITAG with consideration of their suggestions from the members by the secretariat.

❯ **Manual of procedures**
In addition to the ToR, the manual of procedures includes the SOPs related to membership, with the roles and responsibilities of each component of the NITAG, the procedures for developing the annual work plan, the holding of meetings, the procedures for developing recommendation notes, and ethical issues. Since the UNITAG establishment in 2014 the MoP review and update process has not been established.

❯ **Evaluation**
The UNITAG had not been assessed during its 8 years of existence. The unique assessment occurred through the GAVI grant audit missions and were focused on the financial aspects.

4.5. Indicator 5: Making recommendations

The Table V shows the level of maturity assigned for indicator making recommendation of UNITAG

Table V: Indicator 5, Making recommendations criteria met, UNITAG External Assessment Feb 2022.

Sub-Indicators	Maturity Level				
	Beginning	Developing	Intermediate	Advanced	Leading edge
Decision making process	☐ NITAG does not define or follow a standard set of elements as the basis for decision-making or use a formal structure for quality assessment of evidence..	☐ NITAG defines and follows a limited set of elements as the basis for decision-making	☒ NITAG uses a formal structure for reviewing evidence and making recommendations, e.g. SAGE EtR framework		☐ NITAG uses GRADE evidence to recommendations framework
Output and documentation	☐ Recommendation documentation does not meet any of the criteria listed	☐ Recommendations are registered in meeting minutes	☒ Recommendations follow a consistent format and refer to peer-reviewed published material and local evidence or contextual information	☒ Recommendations are documented separately from meeting minutes and are submitted to designated policymakers in the form of a policy brief conforming to country practices	☐ NITAG Chair discusses recommendations with Ministry of Health.
Overall maturity level of the indicator	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☐ Developing ☐ Intermediate ☒ Advanced ☐ Leading edge				

UNITAG is considered at the advanced level of maturity for the indicator on making recommendations.

🞂 **Decision making process**
The process from evidence to recommendations follows a structural framework integrating aspects related to the disease, vaccination and vaccines, economic and operational aspects, and programmatic aspects.

🞂 **Outputs and documentation**
Recommendations are separate from the minutes of UNITAG meetings. Once the recommendations have been adopted by the members of the UNITAG; the secretariat submits a summary to the chairman in the form of a policy briefing for validation. Then the secretariat sends the recommendation note as well as the policy briefing to the Ministry of Health through the EPI program manager channel; who acknowledges receipt.
Established on 2014, UNITAG received first documented request from Uganda Ministry of health referenced ADM:215/3DG/01, on 22 June 2016. The request was related on advising the Immunization program on which new vaccines prioritization for introduction. To respond on this request, UNITAG drew a prioritization framework and evidence to recommendation framework for new vaccine introduction. These recommendations

note was, issued on September 2017 and comprised a compendium of individual recommendations on the following vaccines :MenAfriVac, Measles-Rubella vaccine, Tetanus containing vaccine, Hepatis B birth dose and Yellow fever vaccine.

UNITAG's scientific productions have experienced a dramatic increase in 2021 and during the current year 2022 with fifteen recommendation notes on COVID-19 vaccines and vaccination. This was made possible by an increase in the frequency of meetings of the working group, which are weekly, the support of the Ministry of Health as well as the technical support from immunization partners. In addition, the UNITAG calls on external experts to respond to emerging questions about vaccination, and an ethicist and a modeling expert were included in the COVD-19 working group. The scientific production of UNITAG are shown in the table VI.

Table VI: Recommendations notes issued by UNITAG between 2017 to February. 2022_ UNITAG External assessment February . 2022.

Number	Recommendation notes	Date submission	Remarks
	Recommendation on Men. A vaccine in Routine immunization schedule: should men. A conjugate vaccine be introduced into Uganda's Routine immunization schedule for children?	Sep 2017	
	Recommendation on Measles and Rubella vaccination in the routine immunization program: as part of routine immunizations in the 2nd year of life Should the Uganda EPI consider measles elimination only or Measles & rubella elimination?	Sep 2017	
	Recommendation on Yellow fever vaccination in routine immunization: Should yellow fever vaccination be expanded into the routine Immunization schedule of all children in Uganda?	Sep 2017	Following Minister of Health Request Ref. ADM/215/3DG/01 as of 22nd June 2016, related to Advice the immunization program to prioritize which new vaccines should be introduced
	Recommendation on Hep B vaccination at birth: Should a birth dose of hepatitis B vaccine be introduced into Uganda's routine immunization schedule?	Sep 2017	
	Recommendation on Tetanus vaccination in the routine immunization program: What is the best strategy for Uganda to transition from TT to Td in Order to sustain MNTE elimination and ensure high population Immunity against tetanus?	Sep 2017	

Number	Recommendation notes	Date submission	Remarks
	Recommendation on the Choice of COVID-19 Vaccines for Uganda	20th April 2021	
	Interim recommendation on the Use of the inactivated SARS-CoV-2 BBIBP-CORV-CorV Sinopharm Vaccine	7th June 2021	Addendum to COVID- 19 Vaccine selection Report Submitted April 2021
	Status of Post Vaccine COVID-19 Infections and Breakthrough cases in Uganda	1st July 2021	
	Updated Recommendation on Pfizer-BioNTech vaccine	10th July 2021	
	Recommendation on reprioritization of risk groups in Uganda	9th September 2021	All people aged 30 years and above should be included in the vaccination drives since this age group is bearing the brunt of the epidemic
	The Use of the mRNA Moderna Vaccine in Uganda	7th October 2021	Ratified Recommendation of the Interim Report submitted on September 02, 2021
	Allocation Strategy for the Multiple COVID-19 Vaccines in Uganda	7th October 2021	Ratified Recommendation of the Interim Report submitted on August 09, 2021
	The Significance of COVID-19 Vaccination Prioritization to the Safe Re-Opening and Management of Schools in Uganda	7th October 2021	
	Addendum 2 to UNITAG Report on Priority Groups to be vaccinated against COVID-19 Category 1C: essential non-health worker groups to include in those to be prioritized for COVID-19 vaccination amidst limited doses	9th October 2021	Addition to previous recommended target
	Innovative Recommendations to Increase COVID-19 Vaccine Uptake in Uganda	12th November 2021	
	Interim Advisory on the introduction of more WHO approved COVID-19 Vaccines in Uganda	25th November 2021	
	Interim Advisory on the introduction of COVID-19 vaccine booster doses in Uganda	25th November 2021	
	Accelerating COVID-19 Vaccine Uptake in Uganda (Revised Report)	9th December 2021	Interim report: November 12, 2021
	Advisory Report on the Introduction of More WHO Approved Covid-19 Vaccines In Uganda	9th December 2021	Ratified Recommendation of the Interim Report submitted on November 25, 2021
	Introduction of More WHO Approved Covid-19 Vaccines In Uganda	03rd feb. 2022	Ratified Recommendation of the Interim Report submitted on November 25, 2021

4.6. Indicator 6, Integration into policymaking process

Table VII show the level of maturity assigned for indicator integration into policymaking process

Table VII: Indicator integration into policymaking process criteria met, UNITAG External Assessment Feb 2022.

Sub-indicators	Maturity Level				
	Beginning	Developing	Intermediate	Advanced	Leading edge
Government consideration and solicitation	☐ There is no defined process for the MINISTRY OF HEALTH to officially request recommendations from the NITAG	☒ There is a defined process for the MINISTRY OF HEALTH to officially request recommendations from the NITAG. Process includes mutually agreed-upon timetable for NITAG response	☐ NITAG monitors percentage of recommendations accepted by the MINISTRY OF HEALTH ☐ When MINISTRY OF HEALTH does not accept a NITAG recommendation, a clear explanation for its refusal is provided in writing to the NITAG chair		☐ If warranted by MINISTRY OF HEALTH's explanation for not accepting NITAG recommendations, NITAG improves process for identifying new policy questions
Implementation	☐ NITAG is not involved in reviewing or recommending any implementation, programmatic, or research activities.		☒ NITAG requests reports or presentations regarding implementation efforts and vaccine coverage so members can understand if their recommendation is successful or if further considerations are necessary	☐ As needed in response to identified issues or gaps regarding implementation, NITAG makes evidence-based programmatic recommendations (e.g. regarding logistics, delivery, access, etc.)	☐ NITAG is involved in setting the policy research agenda (i.e. recommendations for R&D, recommendation for filling gaps in programmatic or implementation data
Indicator overall score	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☒ Developing ☐ Intermediate ☐ Advanced ☐ Leading edge				

UNITAG is considered at the developing level of maturity for the indicator integration on policy making process.

❯ Government Consideration: and solicitation UNITAG works on the basis of an official request from the Ministry of Health addressed to the chair person. . From then, a working group is formed in order to proceed with the development of the technical note of recommendation. As of date, interviews reported that no recommendations issued by the UNITAG has been refused by the Ministry of health.

❯ Implementation
The Procedural Manual does not include a mechanism for monitoring recommendations implemented by the Ministry of Health, However the UNEPI team updates the UNITAG members on the progress of the vaccination program during regular meetings. In the recommendation notes, the UNITAG identifies the gaps on evidence and recommends way to fill them.

4.7. Indicator 7:Stakeholder recognition

Table VIII shows the level of maturity for indicator stakeholders recognition of UNITAG.

Table VIII: Indicator, stakeholders recognition criteria met, UNITAG External Assessment Feb 2022.

Sub-Indicators	Maturity Level				
	Beginning	Developing	Intermediate	Advanced	Leading edge
Relationship with stakeholders	☐ Stakeholders and partners in the community are not aware of the NITAG		☒ Members of the scientific and professional community are aware of the NITAG's role and activities and can easily access the NITAG's recommendations	☐ In countries where multiple health authorities issue vaccine recommendations, NITAG's recommendations are recognized as the standard of care; grossly conflicting recommendations are not issued by other authorities. ☐ NITAG accepts input from the public, including organizations that are not represented among non-core members.	☐ NITAG members exchange information and collaborate with relevant partners based on interest
Overall indicator score	Which is the highest category for which ALL criteria are checked? (Note: If anything is checked for the "Beginning" column, then the entire indicator is rated as "beginning.") ☐ Beginning ☐ Developing ☒ Intermediate ☐ Advanced ☐ Leading edge				

UNITAG met annually with immunization stakeholders comprising the NGOs, immunization partners, and health scientific societies. During these meetings, the situation on EPI in the countries is provided by the UNEPI and the NITAG makes presentations on their main recommendations and receives feed-back from the stakeholders. The UNITAG has been considered as an intermediate level of maturity on the integration into the policymaking process.

4.8. Assessment Rating Summary

The table IX shows the overall maturity level of UNITAG as well as for each of the seven indicator of the NMAT.

Table IX: Assigned maturity level met, UNITAG External Assessment, Feb. 2022

Indicators	Level of Maturity				
	Beginning	Developing	Intermediate	Advanced	Leading edge
Overall level of maturity		██			
Establishment and Composition		██			
Independence and Non-bias		██			
Resources and Secretariat Support			██		
Operations		██			
Making Recommendation				██	
Integration Into the Policy Making Process		██			
Stakeholder Recognition			██		

Considering the seven indicators, UNITAG was assigned developing level of maturity for four indicators. These are Establishment and composition, Independence and non-bias, operations and the Integration into policymaking process. UNITAG was assigned at intermediate level of maturity for the indicators resources and secretariat support and stakeholder recognition, while for making recommendations, UNITAG is at advanced level. Therefore, the UNITAG was assigned developing level of maturity overall, as and this was validated by the stakeholders consensus meeting.

5. Strengths and Best Practices

Several strengths and best practices were identified during this assessment.

⮕ **Political commitment at the high level on the key role of UNITAG in the immunization policies and strategies setting-up**

The UNITAG benefits from a high-level of political commitment. This body is requested regularly on the broad immunization issues related to new vaccine introduction, coverage improvement, logistic aspects, and vaccine hesitancy. The context of COVID-19 which reinforces the importance of the UNITAG as systematic resource to provide recommendations on

vaccine choice, strategies, priority population identification, and other related questions. The regular funding of UNITAG annual action plans by the government through the GAVI/HSS grant, since the SIVAC project stopped in 2017 shows the integration in the immunization system.

⮕ **Solid anchorage in the UNAS with broad expertise reinforces the evidence to recommendation process for decision making**

The UNITAG responds as much as possible to the requests from the Ministry of Health. The setting of the secretariat at the Uganda National

Academy of Science is one of the strengths of the UNITAG. Thus, the process of developing recommendations benefit from the expertise within the secretariat and members. The UNAS provides the secretariat with institutional expertise and tools to adequately conduct the evidence-to-recommendation process.

⊗ **Visibility of UNITAG and its work through a website and annual meetings with stakeholders**

The UNITAG is visible through the UNAS website. Several recommendation notes and relevant information are available on this website. The stakeholders annual meeting is an occasion for disseminating UNITAG's activities and constitute best practices to be shared with others NITAGs in the region and worldwide.

⊗ **Standardized evidence informed decision making process (EIDM) for new vaccines introduction**

There is a standardized EIDM process specially for new vaccine introduction with use of a generic recommendation framework and the constitution of dedicated working groups on each request received from the Ministry of Health. The EIDM process benefits from external expertise inputs when required.

⊗ **Acceleration of processes recommendation notes issuance in emergency situations (COVID-19)**

The context of COVID-19 pandemic and urgent needs for tailored decision making based on evidences, has demonstrated the strength of UNITAG. The body has put in place specific working groups which meet weekly and provide timely recommendation to the ministry of health despite the workload of the secretariat and other stakeholders.

6. Challenges

The assessment identified challenges on the functioning and processes of UNITAG, these are.

⊗ Interviews with some stakeholders highlighted **delay of the process for certain requests** submitted to UNITAG (case of the Hepatitis B vaccine at birth recommendation note).

⊗ Secretariat balancing between their academic engagement and UNITAG support increases the workload for **the two dedicated personnel.**

⊗ **Delay on the renewing of membership terms:** the UNITAG was set up on Dec 2014, and UNITAG renewed all membership in 2018 for 3 years. This last term of members would have finished 2021. The next membership renewal needs to deal with the respect of procedures and on keeping the institutional memory. In addition, the specificity of UNITAG is that the membership of ex officio members and liaison members is limited in the manual of procedures to three years and not on the termination of their function within their institutions.

⊗ **Absence of manual of procedure update** based on the lessons learnt on the functioning and new context of immunization.

⊗ Delay in the funding disbursement for UNITAG activities with perception of complex administrative procedures on the part of the secretariat. This impacts the timely implementation of its outputs.

⊗ Non assurance on the sustainability of funding within the country budget for UNITAG activities.

⊗ Absence of clear standards operation procedures (SOP) for conflict of interest assessment and management.

⊗ Absence of SOPs for the monitoring of UNITAG recommendation implementation by the Ministry of Health.

⊗ Non specification of UNITAG role on the research and development agenda for immunization.

❯ For upcoming in-country production of vaccines, as immunization will be concerned by new challenges in terms of potential contribution of some of it members to local clinical trials, interaction with the pharmaceutical industry with potential impact conflict of interest policies, in independence and public trust

7. Recommendations

❯ UNITAG should update the manual of procedures following the findings of this assessment on following aspects:

- Extending UNITAG membership and composition policy taking in account new expertise needed - Geriatrics, Internal Medicine, Family health, Gyn-obstetrics, Ethicist, Mathematic modelers- in the context of evolving immunization context at global, regional and local,

- Core members terms renewal integrating the consideration of institutional memory,

- Ex-officio and liaison members terms taking in account duration of their position within theirs organization and agencies,

- Developing Policies for conflict-of-interest assessment and management,

- Defining timeline of delivering recommendations notes for ordinary requests as well as for ad-hoc ones in emergencies situations.

- Extension the liaison membership to other relevant immunization in country partners .

❯ Set up SOPs on the relationship between UNITAG and other technical or advisory bodies established during health emergencies situation like the COVID-19 pandemic, emphasizing the independence of UNITAG, mechanism of interaction, and formalization of inputs from external expertise (secretariat).

❯ Organize the process for membership term renewal taking in account the institutional memory need (UNITAG, MoH).

❯ Set up SOP in the context of upcoming local production of vaccines in Uganda taking in terms of access to raw data on local vaccine trials, interaction of UNITAG with those manufactures (UNITAG Secretariat).

❯ Engage in discussions and advocacy on the sustainability of the NITAG support funding in consideration of the upcoming country gradation from GAVI support (UNITAG Chair, partners).

❯ Enhance the treatment of funding request from UNITAG for timely implementation of its activities (Ministry of Health, Partners).

❯ Extend the secretariat personnel to reduce the workload and improve the timely technical support and recommendation issuance (Chair, UNEPI)

❯ Train the UNITAG secretariat and members on GRADE methodology and other capacity building on EIDM. (WHO, CDC).

❯ Organize a training of potential new appointed NITAG members on Evidence to Recommendation process materials (WHO, CDC)

❯ Update the UNITAG website uploading the manual of procedures, recommendation notes, and others documents.

❯ Share with others NITAGs the recommendations notes through WHO NITAG -Resources Center website.

❯ Considering the volume of recommendations based on evidences issued by UNITAG, it is highly recommend to make scientific publication on its experience on decision making in immunization particularly during the COVID-19 vaccines roll out.

❯ Update UNITAG 2022 work plan by integration of keys immediate priorities highlighted by the assessment.

Specifics next step validated during the stakeholders meeting are highlighted in the annexes

8. Priority next steps

Next steps identified and validated during the stakeholders consensus meeting

Table X: Next Priority Next Steps validated_ UNITAG external Assessment feb. 2022.

Indicator	Current level of Maturity	immediate next Steps	Other next Steps
Establishment and Composition	Developing	✔ Update the current MOP (ex chap 2.1.2 on monitoring performance, term of liaison members, ex officio members)	✔ Make public the MOP on the UNAS and the NITAG resource center websites ✔ Extend the core members with new expertise (ie in Geriatric, internal medicine, family health, Gyn-obstetrics, modelling)
Independence and Non-bias	Developing	✔ Process the renewal of membership taking in account the need for institutional memory and after open publication for competition ✔ Describe in the SOP on conflicts of interest concerning (Financial, ie amount, period) ✔ Develop a tool on the assessment of conflicts of interest by the secretariat	✔ Training of new appointed members once NITAG will renew members terms
Resources and Secretariat Support	Intermediate	✔ Take advantage of the opportunity of the existence in Ministry of Health of a budget line intended for committees to include financing of the NITAG ✔ Advocate with the Ministry of Health to ensure the sustainability of NITAG funding (GAVI Gradation perspective)	✔ Strengthen the secretariat by extending the personnel dedicated to NITAG technical support ✔ the NiSH to support on EIDM, modeling. (WHO)

Indicator	Current level of Maturity	immediate next Steps	Other next Steps
Operations	Intermediate	Review Regularly the MOP taking in account new immunization environment (performance assessment, COI assessment, GRADE and EtR frameworks, local vaccine manufactures dev, public health emergencies, relations with others professional/advisories bodies)	
Making Recommendation	Advanced	✔ Training of Secretariat and NITAG members on GRADE	✔ Refresher training on EtR new modules
Integration Into the Policy Making Process	Developing	✔ Establish a schedule for the development of recommendations to meet the need for timely decisions by the Ministry of Health ✔ Establish between the Ministry of Health and the NITAG, a process for monitoring the implementation of the recommendations	
Stakeholder Recognition	Intermediate	✔ Establish a coordination mechanism between the NITAG and other scientific societies (association of pediatrics, gyn-obstetrics, geriatrics) for harmonization of immunization guidance and practices	

Annexes

Annex 1: List of Interviewees

Names	Function in UNITAG
Prof. Nelson SEWANKAMBO	Chair, core Member
Prof. Peter WAISWA	Core member
Dr. Sabrina KITAKA	core member
Dr. Charlotte MUHEKI	Core member
Dr. Alfred DRIWALE	Ex officio, EPI program manager
Dr. Immaculate AMPEIRE	Ex-officio Member
Dr. Patrick KADAMA	Ex-Officio Member
Dr. Eva KABWONGERA	Liaison member, UNICEF
Ms. Celia NALWADDA	Secretariat
Ms. Doreen NAMARA,	Secretariat
Mr. William BIGAMBWENSI	Secretariat

Annex 2: Data Collection Tool

NITAG ASSESSMENT DATA COLLECTION TOOL

Country:

Respondent:

Assessment team members:

Date:

INDICATOR 1: ESTABLISHMENT

Official status

1. Are there official measures or documents that established the NITAG? (note to assessor: will want to request these documents and review as part of assessment.)

- Yes

- No

Contextual question(s):

- If yes:

  - What specific measures or documents exist that establish the NITAG?

  - Are there ways the establishment of the NITAG could be strengthened? (note to assessor: probe about legislation or higher level ministerial decrees.)

- If no:

  - Are their procedures you recommend that the MoH, NITAG, Secretariate, or government follow to officially establish the NITAG? (note to assessor: probe about possibility of legislation or government mandates.)

  - Does the fact that there are no official measures or documents establishing the NITAG impact the ability of the NITAG to function properly? If so, in what ways?

  - What are the challenges or barriers to officially establish the NITAG? How can these be overcome?

List any strengths, challenges, or other relevant comments:

Terms of reference (TOR) (note to assessor: you will want to request a copy of the TORs to review as part of the assessment)

1. Are there written terms of reference (TORs)?

❯ Yes (Go to question 2)

❯ No (Go to next contextual questions)

2. What do the TORs include? (check all that apply)

❯ Mandate defining the NITAG's scope of work.

❯ Necessary aspects of NITAG structure and organization (see user's guide for details).

❯ Other (specify)_____

3. How often are TORs shared with members? (check all that apply)

❯ When joining the NITAG

❯ Whenever changes are made.

❯ Other (specify)_____

4. Which members are aware of the TORs? (check one)

❯ NITAG Chair only

❯ Some but not all members

❯ All members

5. How often are TORs reviewed and updated? (check all that apply)

❯ There is no policy for how often TORs are reviewed

❯ Reviewed at least every two years

❯ Updated as needed

❯ Other (specify) _____

Contextual question(s):

❯ If TORs exist:

- What are the strengths of the TORs?

- Are there specific procedures or policies you feel need to be added to the existing TORs?

- Are there specific aspects of the TORs that could use improvement or revision? If so, what are the challenges and barriers to making these improvements and how can they be overcome?

❯ If TORs do not exist:

- Are there specific barrier or challenges to creating TORs for the NITAG? How can these be overcome?

List any strengths, challenges, or other relevant comments:

Diversity of expertise

1. How many areas of expertise are represented among the NITAG members (see user's guide for details)? (check one)

❯ Fewer than five areas of expertise (go to question 3)

❯ At least five essential areas of expertise are represented among NITAG members (go to question 2)

2. If there are at least five essential areas of expertise (see question 1 above), please note if:

❯ In addition to essential expertise, members possess expertise in topics and/or populations that span the life course and have access, via secretariat and/or invited guests, to additional areas of expertise.

❯ There is a redundancy of experts among members so that all areas of expertise are still represented when absences occur.

3. Who has voting authority? (check all that apply)

❯ Secretariat members

❯ Core members

❯ Non-core members

❯ Others

4. How are members selected? (check one)

❯ They are appointed.

❯ There is open competition for membership spots.

5. Do core members have limited terms?

❯ Yes (Go to question 6)

❯ No (Go to contextual questions)

6. Are core members' terms staggered to ensure continuity (i.e. terms do not all expire at once).

❯ Yes

❯ No

Contextual question(s):

❯ Are there specific areas of expertise that are not represented or underrepresented in the NITAG that you feel should be included?

❯ Are there any specific changes you would recommend regarding who has voting authority, recruitment of members, or term lengths of members? If so, what would you recommend and are there any barriers/challenges to implementing those recommendations? How can the challenges and barrier be overcome?

List any strengths, challenges, or other relevant comments:

INDICATOR 2: INDEPENDENCE/BIAS

Disclosure and conflict of interest process

1. Does the NITAG have a policy on declaration of interests (DOIs)? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 2)

❯ No (go to question 4)

2. Who is required to complete declaration of interests DOIs? (select all the apply)

❯ There are no DOI requirements. (go to question 3)

❯ Core members upon appointment.

❯ Secretariat staff

❯ Working group members.

❯ Non-core members.

3. How often are DOIs updated?

❯ DOIs are not updated.

❯ DOIs are routinely updated.

4. Does the NITAG follow a formal written policy on conflict of interest (COI). (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 5)

❯ No (go to contextual questions)

5.Does the COI policy describe process(es) for assessing and managing COIs. (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes

❯ No

Contextual question(s):

❯ If there is a policy on declaration of interest (DOI), are there areas for improvement you feel are needed regarding the DOI policy or its implementation? What are the challenges and barriers to making these improvements and how can they be overcome?

❯ If there is a policy on conflict of interest (COI), are there areas for improvement you feel are needed regarding the DOI policy or its implementation? What are the challenges and barriers to making these improvements and how can they be overcome?

❯ If DOI or COI policies do not exist, what are the barriers or challenges to adopting these policies? How can these be overcome?

List any strengths, challenges, or other relevant comments:

Transparency and Independence from Workplace

1. Are any NITAG documents shared with the public? (note to assessor: will want to request examples of these documents and review as part of assessment.)

❯ Yes (go to question 2)

❯ No (go to question 3)

2. What NITAG documents are shared and how are they shared? (check all that apply)

❯ TORs and standard operating procedures (SOPs) are publicly available.

❯ Agendas, meeting summaries, and records of decisions are publicly available.

❯ Technical reports and position papers are publicly available.

❯ NITAG actively disseminates all publicly available materials, e.g. on its website, through a   journal, or via bulletin.

3. Are observations of meetings by non-members permitted?

❯ Yes (go to question 4)

❯ No (go to question 5)

4. Who can attend the meetings and how are the meetings observed? (check all that apply)

❯ Observations are permitted upon request and approval.

❯ Observations are permitted on a scheduled basis.

❯ Meetings are broadcast publicly.

❯ Other (specify)_____

5. Is there a policy in place to ensure members do not promote their primary employer's priorities, views, and/or products? (note to assessor: will want to request examples of these documents and review as part of assessment.)

❯ Yes

❯ No

Contextual question(s):

❯ Do you have any suggestions regarding how the NITAG can improve transparency? What are the challenges and barriers to improving transparency and how can they be overcome?

❯ Are there any challenges or limitations regarding NITAG transparency? How can these be overcome?

❯ If no policy in place to ensure members do not promote their workplace, are there any barriers or challenges to adopting a policy? How can they be overcome?

List any strengths, challenges, or other relevant comments:

INDICATOR #3: RESOURCES/SECRETARIAT SUPPORT

Secured funding

1. Is there secured funding?

❯ Yes (go to question 2)

❯ No (go to contextual questions)

2. What statements below are correct regarding the secured funding? (check all that apply)

❯ Funding covers all basic operational costs.

❯ Funding is robust.

❯ Funding can cover travel expenses for national and international activities related to NITAG strengthening (e.g. regional or global NITAG meetings, collaborations and training).

Contextual question(s):

> If secured funding exists, please describe where the secured funding comes from and if it is guaranteed yearly.

> If secured funding exists, is it sufficient for the successful operation of the NITAG? If not sufficient, what operations need additional funding?

> Are there any barriers or challenges regarding NITAG funding? If so, how can these be overcome?

> If secured funding does not exist, what are the challenges and barriers to obtaining secured funding and how can they be overcome?

List any strengths, challenges, or other relevant comments:

Access to relevant data and information

1. What type of access does the NITAG have to relevant global data and information? (check one)

> No access to global information/data

> Inconsistent access to global information/data

> Adequate access to global information/data

> Consistent and comprehensive access to global information/data

2. What type of access does the NITAG have to relevant regional data and information? (check one)

> No access to regional information/data

> Inconsistent access to regional information/data

> Adequate access to regional information/data

> Consistent and comprehensive access to regional information/data

3. What type of access does the NITAG have to relevant local data and information? (check one)

> No access to local information/data

> Inconsistent access to local information/data

> Adequate access to local information/data

> Consistent and comprehensive access to local information/data

4. Does the NITAG have access to raw global, regional, or local information/data? (check all that apply)

❯ No access to raw information/data

❯ Access to raw global information/data

❯ Access to raw regional information/data

❯ Access to raw local information/data

Contextual question(s):

❯ Is there specific information/data that the NITAG is unable to access that you feel is most important for the NITAG to have the ability to access?

❯ What are the challenges and barriers to accessing information/data and how can they be overcome?

List any strengths, challenges, or other relevant comments:

Access to external technical expertise

1. Does the NITAG solicit input from external experts? (check one)

❯ NITAG does not solicit or accept input from external experts.   (go to contextual questions)

❯ NITAG rarely solicits or accepts input from external experts. (go to question 2)

❯ NITAG routinely obtains ad hoc input from external experts. (go to question 2)

2. Does the NITAG formalize relationships with external experts through non-core membership, as appropriate.

❯ Yes

❯ No

Contextual question(s):

❯ If does not solicit input from external experts, what are the challenges and barriers to soliciting input and how can they be overcome?

❯ If do solicit input from external experts, are there improvements that can be made to how input from experts is obtained? (note to assessor: this could be regarding who solicits input, how often input is requested, or when input is requested)

List any strengths, challenges, or other relevant comments:

Secretariat support

1. Is there an officially appointed Secretariat to support the NITAG?

❯ Yes

❯ No

2. What type of support does the Secretariat provide? (check all that apply)

❯ There is no officially-appointed Secretariat to support the NITAG.

❯ Secretariat provides active administrative support.

❯ Secretariat provides basic technical support.

❯ Secretariat is able to conduct and/or outsource advanced analyses.

❯ Secretariat has multiple full-time staff members with a mix of skill sets that support the NITAG.

Contextual question(s):

❯ If no Secretariat, what are the barriers and challenges to appointing a Secretariate and how can they be overcome?

❯ If there is a Secretariate, what support provided is the most helpful to the NITAG?

❯ If there is a Secretariate, what areas of support can be improved upon and how? What are the barriers to improving the support needed and how can they be overcome?

❯ If there is a Secretariate, what areas of support are not being received? What are the barriers to providing the support needed and how can they be overcome?

List any strengths, challenges, or other relevant comments:

INDICATOR 4: OPERATIONS

Meeting logistics

1.   How often does the NITAG meet? (check one)

❯ Less than annually.

❯ At least annually.

❯ More than annually, and as needed beyond regular schedule

2. Are agendas produced for NITAG meetings? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 3)

❯ No (go to question 4)

3. When are the agenda items for the meeting circulated? (check one)

❯ At the meeting.

❯ At least one week before meetings.

❯ Other (specify)_____

4. Are background documents produced for NITAG meetings? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 5)

❯ No (go to question 7)

5. What statement below best describes the background documents produced for the meetings? (check one)

❯ Background documents include very limited information

❯ Background documents are missing some key pieces of information.

❯ Background documents are comprehensive.

6. When are the background documents for the meeting circulated? (check one)

❯ At the meeting.

❯ At least one week before meetings.

❯ Other (specify)_____

7. Are NITAG members invited to suggest agenda items for Secretariat review.

❯ Yes

❯ No

Contextual question(s):

❯ Discuss the strengths of the meeting process.

❯ Discuss areas of improvement for the meeting process (regarding frequency of meetings, setting the agenda, documents prepared), as well as any challenges and barriers and how they can be overcome.

List any strengths, challenges, or other relevant comments:

Standard operating procedures (SOP)

1. Are there written formal standard operating procedures (SOPs) for NITAG operations? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 2)

❯ No (go to contextual questions)

2. Are the SOPs formalized in a basic manual of procedures (MoP)? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes (go to question 3)

❯ No (go to next section: Evaluation)

3. What does the MoP include? (check all that apply)

❯ COI policy and budget.

❯ Recommendations and tools for orienting members.

❯ Recommendations and tools for evaluating members.

4. How often is the MoP reviewed? (check one)

❯ They are not routinely reviewed.

❯ Regularly and updated as needed.

5. Are members made aware of the MoP?

❯ Yes (go to question 6)

❯ No (go to next section – Evaluation)

6. How are members made aware of the MoP? (check all that apply)

❯ NITAG does not ensure members are aware of the MoP.

❯ Updates are promptly circulated to all members.

❯ New member orientation includes review of the MoP.

Contextual Question(s):

❯ If no SOPs, what are challenges or barriers to adopting SOPs? How can these be overcome?

❯ If SOPs exist, are there improvement to the SOPs that you would recommend? What are challenges or barriers to improving the SOPs and ow can these be overcome?

❯ If no MoP, what are challenges or barriers to creating an MoP? How can these be overcome?

❯ If MoP exists, are there improvement to the MOP that you would recommend? What are challenges or barriers to improving the MoP and how can these be overcome?

List any strengths, challenges, or other relevant comments:

Evaluation

1. How often is the NITAG evaluated? (check one)

❯ There is no system for evaluating the NITAG.

❯ NITAG is evaluated, but without a regular schedule

❯ NITAG is regularly evaluated

2. Is there a standardized tool that is used to evaluate the NITAG? (note to assessor: will want to request these documents and review as part of assessment.)

❯ Yes

❯ No