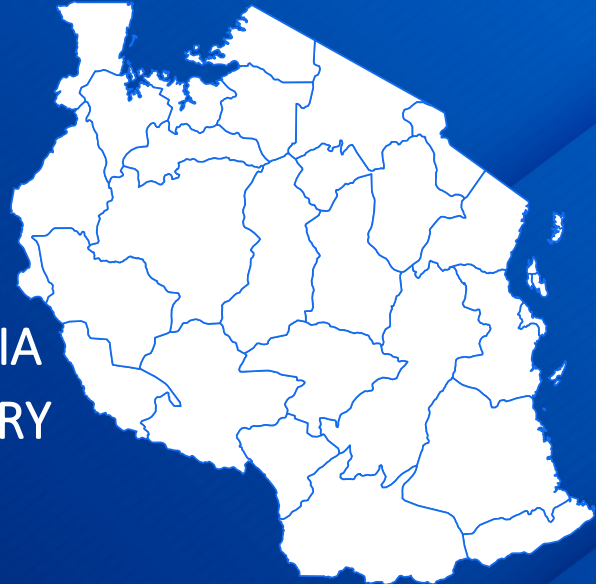


# REPORT

## EXTERNAL ASSESSMENT OF TANZANIA IMMUNIZATION TECHNICAL ADVISORY GROUP (TITAG)



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## 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.

To fulfill this role, the NITAG must be well established and operate based on formal operating procedures and strong support from the secretariat and partners. 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 through 17 indicators of NITAGs using the WHO/SIVAC or CDC's NITAG simplified assessment tool. These indicators are assessed, every three years during internal or external evaluation exercise.

The update of these tools was carried out between 2020 and 2021 by integrating other specific indicators and criteria to classify the NITAGs into five categories of maturity: Basic, Developing, Intermediate, Advanced, Leading edge. Seven indicators are used to identify the maturity level: Establishment and composition, Independence and non-bias, Resources and secretariat support, Operations, Process for making recommendation, Integration in the policymaking process, and Stakeholder's recognition. The NITAG Maturity Assessment Tool (NMAT) was), developed in 2021 by a working group NITAG subject matter experts lead be CDC/Atlanta with participation of WHO, GAVI, Wellcome and Task Force for Global Health. The tool has integrated the original 17 indicators, as well as other indicators and specific criteria. It is in this context that WHO AFRO conducted an external assessment of Tanzania Immunization Technical Advisory Group (TITAG) from 13 to 17 March 2023.



## Objectives

The main objective of this external evaluation was to classify the Tanzania NITAG (TITAG) level of maturity using the NMAT tool and to identify appropriate actions for its strengthening.

Specifically, this assessment aims to:

- Describe and analyze TITAG administrative and normative aspects (composition, modus operandi, funding, secretariat support)
- Assess TITAG standard operating procedures for Evidence to Recommendation (EtR) process
- Assess the TITAG integration level into the health system and impact on immunization policies
- Identify best practices, challenges to strengthen TITAG functioning and its evidence-based process

## Outputs of the assessment

- TITAG maturity profile validated by all stakeholders.
- An improvement plan, and implementation roadmap agreed
- Assessment report with input from NITAG members and stakeholders available.

## Methods and tools

This assessment has been conducted by a team composed by expert from WHO Regional Office for Africa deployed on site and another expert from Inter-country support Team for Eastern and Southern Africa, in remote support from 13 to 17 March 2023. Background documents such as the assessment terms of reference, the NMAT data collection tool paper based as well as the electronic version were shared two weeks prior with the country team. In addition, for planning purpose, a draft agenda was shared with the focal person in the Secretariat. The tools have been completed during the key informant interviews.

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

## ➤ Desk review:

The assessment team reviewed the TITAG documentation: Official documents (decree, appointment letters), Internal Manual of procedures, Meetings minutes, Recommendations notes, other official communication.

## ➤ Interviews

These were conducted in person and virtually. TITAG Chairperson, secretariat focal person, two core members, one ex officio member (EPI manager), WHO and UNICEF immunization focal persons as liaison members, were interviewed. The data collection tool (appendix 2) was used within the context of TITAG. This was followed by scoring using

INDICATOR 1: ESTABLISHMENT AND COMPOSITION						
	Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
1 Official Status	No official measures or documents have established the NITAG.	Official measures or documents have established the NITAG.	Intermediate will automatically fill if you select Developing.	Advanced will automatically fill if you select Developing.	Leading Edge will automatically fill if you select Developing.	Leading Edge
2 Terms of Reference	N/A 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 and updated regularly.	TORs are reviewed at least every 3 years and updated as needed.	Leading Edge
3 Diversity of Expertise	Fewer than five areas of expertise represented among NITAG members.	At least five areas of expertise represented among NITAG members.	Intermediate will automatically fill if you select Developing.	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 the minimum areas of expertise are still represented when absences occur.	Intermediate
4 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.	Core membership terms are limited and staggered.	There is open competition for membership spots.	There is a policy process for terminating membership prior to completion of membership term.	Intermediate
OVERALL MATURITY LEVEL FOR THIS INDICATOR						Intermediate

the excel based NMAT electronic template and results from the assessment were used to prepare the insights for the stakeholders meeting.

We had a meeting on 16 of March 2023 with the TITAG members and secretariat. Consensus on the maturity level assigned for each NMAT indicators and sub indicators was agreed. These results collectively defined the next steps to plan the TITAG functionality improvement.

The NMAT has been developed as a practical planning, monitoring, and evaluation tool to guide, develop, and refine TITAG 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 five levels of maturity that are basic, developing, intermediate, advanced, and leading edge. For each indicator, the appropriate maturity level is the one at which the NITAG

meets all the criteria. If any criteria are checked under the basic maturity level, the indicator is assessed at basic maturity level. The overall maturity level assigned is the one lowest level checked for all the criteria. 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.

## 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 (cell in green) were considered as met by the assessment team and validated during the Stakeholders meeting.

## Indicator 1, Establishment and Composition

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

*Table I: Indicator I, Establishment and Composition criteria met, TITAG External Assessment, March 2023.*

INDICATOR 1: ESTABLISHMENT AND COMPOSITION							
	Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS	
1 Official Status	N/A No official measures or documents have established the NITAG.	x Official measures or documents have established the NITAG.	x Intermediate will automatically fill if you select Developing.	x Advanced will automatically fill if you select Developing.	x Leading Edge will automatically fill if you select Developing.	Leading Edge	
2 Terms of Reference	N/A NITAG lacks written Terms of Reference (TORs).	x NITAG has written TORs including a mandate defining scope of work.	x TORs address NITAG structure and are shared with members whenever updated. All members aware of TORs.	x TORs are reviewed and updated regularly.	x TORs are reviewed at least every 3 years and updated as needed.	Leading Edge	
3 Diversity of Expertise	N/A Fewer than five areas of expertise represented among NITAG members.	x At least five areas of expertise represented among NITAG members.	x Intermediate will automatically fill if you select Developing.	x Members' areas of expertise span life course. NITAG has access to additional areas of expertise.	x There is a redundancy of experts among members so that the minimum areas of expertise are still represented when absences occur.	Intermediate	
4 Membership	N/A There are no practices or processes in place regarding core member voting authority, recruitment, or term limits.	x Core members have voting authority, while non-core members do not.	x Core membership terms are limited and staggered.	x There is open competition for membership spots.	x There is a policy process for terminating membership prior to completion of membership term.	Intermediate	
OVERALL MATURITY LEVEL FOR THIS INDICATOR						Intermediate	

TITAG is considered at the intermediate level of maturity for indicator 1 on establishment and composition.

## ➤ **Official status**

Tanzania NITAG has been established in November 2016 by the Ministry of Health.

## ➤ **Terms of Reference (ToR)**

The TITAG serves as both a technical resource and a deliberative body; responsible for providing independent evidence-based recommendations on all technical and scientific matters related to immunization, without political or any other influence. The committee does not implement activities or supervise immunization programmes, but instead provides technical advice on policy matters regarding immunization services, gives evidence-based recommendations on policy change/improvement, and provides guidance for new immunization policies. All interviewees were aware of the existence of the ToR which have been shared, upon new members appointment in July 2021.

## ➤ **Membership and diversity of expertise**

The first TITAG members were appointed officially by Minister for Health on 20th January 2017. The second term group was appointed on 1st of April 2021. Fourteen experts constitute the current core membership among eleven domains of expertise: 01 Pediatrician, 01 Epidemiologist, 02 Microbiologist-Virologist, 01 biostatistician, 01 Public health expert, 01 health economist, 03 Pharmacist (quality assurance, importation of medical product, vertical Program coordination), 01 research scientist, 01 sociologist, 01 chemist; In the context of COVID-19 pandemic, a lawyer has been added to core membership. In addition, the TITAG has experts with cross-cutting expertise such as in (Epidemiology, Public health, Microbiologist). The ex-officio members are represented by the Immunization and Vaccine Development (IVD) Program manager, a public health specialist and the Director of Preventive Services (DPS).

Depending on the policy question; staffs from MOH are Co-opted as ex-officio and invited to join the TITAG meetings such as the Chief Medical Officer, Permanent secretary, and Assistant Permanent Secretary as well from Muhimbili University of Health and Allied sciences (MUHAS).

TITAG work is supported by the secretariat constitute by two staff from MOH/IVD Program with expertise in Pediatrics, Epidemiology and Public Health. The core members are chosen by cooptation by the IVD Program. Then the MOH appoint members and expression of interest

letters sent to those experts for acceptance and signature of DOI and confidentiality forms. The Chairperson is being appointed by the Minister while his assistant, the Vice Chairperson is /has been elected by the TITAG's core members. Following the internal procedure manual, only core members vote during recommendation notes deliberations. The term of office is 4 years renewable once. For institutional memory purpose, at least the third of core members remain for each term renew. Thus, three members of the current term, started in 2021, were in the previous membership.

## Indicator 2, Independence, and non-bias

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

*Table II: indicator 2, Independence and non-bias criteria met, TITAG External Assessment, March 2023.*

		Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
1	Disclosure and conflict of interest process	N/A Declaration of Interests (DOI) is not mandatory for core members.	x DOI is mandatory for core members upon appointment.	DOI is mandatory for secretariat and working group members. DOIs are routinely updated.  NITAG follows a formal, written Conflict of Interest (COI) policy with definitions of types of COI.	Conflict of Interest (COI) policy describes process(es) for assessing and managing COIs.	DOI is mandatory for non-core members, upon appointment and when a change arises.  DOI is mandatory for core members before every meeting.	Developing
2	Transparency	x 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., website, a journal, or bulletin).	Observation of meetings by non-members is permitted upon request or on a scheduled basis, or meetings are broadcast publicly.	Basic
3	Independence from primary workplace of members	N/A There is no policy in place to ensure members do not promote their primary employer's priorities, views, and/or products.	x A policy is in place to ensure members do not promote their primary employer's priorities, views, and/or products.	x Intermediate will automatically fill if you select Developing.	x Advanced will automatically fill if you select Developing.	x Leading Edge will automatically fill if you select Developing.	Leading Edge
OVERALL MATURITY LEVEL FOR THIS INDICATOR							Basic

TITAG is considered at the basic level of maturity for the indicator 2.

### ➤ Disclosure and conflict of interest process

The TITAG internal manual procedures describes the declaration of interest (DOI) policy. Thus, the declaration of interest is mandatory upon the appointment for core members and non-core members of the TITAG except the secretariat. This declaration of conflict of interest is regularly signed before each meeting of working groups as well for TITAG statutory meetings



by core members and archived by the secretariat. The assessment of the DOI are not explicit regarding the “how” and “by whom” the latter are assessed and managed.

## ➤ Transparency

TITAG recommendations as well as meetings minutes are not publicly available. However, the Ministry of Health refers to the recommendation made by the TITAG during official statements.

## ➤ Independence from primary workplace

According to its Terms of reference, TITAG is an independent body, and it was gathered in the interviews that all core members are independent from the immunization program and from their primary workplaces.

## Indicator 3, Resources and Secretariat support

The table III shows the level of maturity assigned for the indicator Resources and Secretariat Support of TITAG.

*Table III: indicator 3, Resources and Secretariat support criteria met, TITAG External Assessment March 2023.*

		Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
1	Secured Funding	N/A There is no funding to cover <b>basic operational costs</b> .	X There is funding to cover basic operational costs.	x A <b>guarantee of funding</b> from the government covers basic operational costs.	Guaranteed funding is robust.	There is access to funding that can cover travel expenses for national and international NITAG strengthening activities (regional or global NITAG meetings, collaborations, training).	Intermediate
2	Access to Relevant Data and Other Necessary Tools	N/A NITAG has inconsistent access to regional and global <b>information</b> ; no access to local information.	x NITAG has adequate access to regional and global information.	x NITAG has consistent and comprehensive access to global and regional information, as well as adequate access to local information.	x NITAG has consistent and comprehensive access to reliable local, regional, and global information.	x NITAG has access to <b>raw data</b> or can request specific analyses of the data presented.	Leading Edge
3	Access to External Technical Expertise and Capacity-building Tools	N/A NITAG does not solicit or accept input from external experts.	x NITAG solicits or accepts input from <b>external experts</b> .	x NITAG routinely gets input from external experts.	x As appropriate, NITAG formalizes relationships with external experts through non-core membership.	x <i>Leading Edge will automatically fill if you select Advanced.</i>	Leading Edge
4	Secretariat Support	N/A There is no officially appointed <b>Secretariat</b> to support the NITAG.	X Secretariat provides active administrative support.	x Secretariat provides basic technical support.	x Secretariat or designated support services are able to conduct and/or outsource advanced analyses.	Secretariat has multiple full-time staff members with a mix of skill sets.	Advanced
OVERALL MATURITY LEVEL FOR THIS INDICATOR							Intermediate

TITAG is considered at intermediate maturity level for the indicator resources and secretariat support.

## ➤ Secure funding

Annually, a workplan is drafted by the secretariat and endorsed by the TITAG members. funding for TITAG activities is supported through GAVI funding, either by TCA (WHO,

UNICEF) or by HSS. Other NGO's such as CHAI, JHPIEGO and others have also provided financial support to the workplan implementation. The TITAG holds quarterly meetings in the form of workshops from 5 days to 14 days, the costs covered concerning air tickets and DSAs. Funds mobilization issues encountered during the first term of the TITAG have been resolved during the COVID-19 vaccines deployment, with additional resources from the GAVI/CDS. However, as of to date, the TITAG plan is not fully integrated in the EPI annual plans.

## ➤ Access to data

The evaluation revealed consistent and comprehensive access to the local, regional, and global evidence. The TITAG has access to local raw data and additional analysis can be requested to specifically to the disease surveillance data. Moreover, individual contribution of TITAG core members who mostly come from the academies are frequently requested support as well from external expertise beyond the TITAG membership, when needed and depending on the topics at the agenda.

## ➤ Secretariat support

The technical and scientific secretariat is provided by two IVD Program civil servants with expertise in pediatrics, public health, and vaccinology. the latter, cover both the TITAG work, as well their tasks within the immunization program.

# Indicator 4, Operations

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

*Table IV: Indicator 4 operations criteria met, TITAG External Assessment March 2023.*

INDICATOR 4: OPERATIONS						
	Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
1 Meeting logistics	N/A NITAG meets less than once a year.	x NITAG meets about once a year. <b>Agenda and background documents</b> are circulated at least one week before meetings.	x NITAG meets more than once a year, and as needed beyond regular schedule. NITAG members are invited to suggest agenda items for secretariat review.	x Background documents are comprehensive.	x <i>Leading Edge will automatically fill if you select Advanced.</i>	Leading Edge
2 Standard Operating Procedures (SOP)	N/A <b>Standard operating procedures (SOPs)</b> are not formalized.	x SOPs are formalized in an official NITAG document.	x SOPs include or refer to COI policy.	x SOPs include recommendations and tools for orienting and educating members. Orientation includes review of SOP.	x SOPs are regularly reviewed, updated as needed, and updates are promptly circulated to all members. SOPs include the process to make a recommendation in an emergency situation.	Leading Edge
3 Evaluation	x There is no system for <b>evaluating</b> the NITAG.	NITAG is evaluated, but without a regular schedule or standardized tool.	NITAG has been evaluated at least once using a standardized tool.	NITAG is regularly evaluated using a standardized tool.	There is a process in place to monitor the implementation of evaluation recommendations.	Basic
OVERALL MATURITY LEVEL FOR THIS INDICATOR						Basic

TITAG is at the leading edge of maturity for the sub-indicators: meetings logistics as well as for Standards operating procedure; however, the absence of an evaluation mechanism brings it back to the basic level concerning the indicator, Operation.

### ➤ Meeting logistics

Referring to the JRF, TITAG held at least one ordinary meeting over the last 5 years with an annual average of two. The documents and the agenda of the meetings are shared at least two weeks before the meetings of the working groups and the statutory meetings of the TITAG.

### ➤ Internal manual of procedures

The manual of procedures includes the SOPs related to membership, with the roles and responsibilities of each component of the TITAG, the procedures for developing the annual work plan, the holding of meetings, developing recommendation notes.

### ➤ Evaluation

the TITAG has not benefit from any self or external assessment its creation in 2016.

## Indicator 5: Making recommendations

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

*Table V: Indicator 5, Making recommendations criteria met, TITAG External Assessment, March 2023.*

		Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
1	Decision-making process	N/A NITAG does not define or follow a standard set of elements as the <b>basis for decision-making for a recommendation</b> or use a formal structure for quality assessment of evidence.	x NITAG defines and follows a limited set of elements as the <b>basis for decision-making</b> for a recommendation.	x NITAG uses a formal structure for reviewing evidence and making recommendations, for example, <b>SAGE EtR framework</b> which can include graded evidence or systematic reviews from other groups.	x <i>Advanced will automatically fill if you select intermediate.</i>	x NITAG uses tools to assess quality of evidence such as GRADE, CASP, SIGN, etc.	Leading Edge
2	Documentation and Communication	N/A Recommendation documentation does not meet any of the criteria listed.	x Recommendations are registered in meeting minutes.	x Recommendations follow a consistent format and refer to peer-reviewed published material and local evidence or contextual information.  Recommendations are also documented separately from minutes and systematically <b>archived</b> .	x Recommendations are submitted to designated policymakers in the form of a policy brief conforming to country practices.	x For recommendations that are not adopted, there is process for NITAG Chair (or designee) to discuss recommendations with policy decision makers.	Leading Edge
OVERALL MATURITY LEVEL FOR THIS INDICATOR							Leading Edge

TITAG is considered at the leading edge of maturity for the indicator on making recommendations.

## ➤ **Decision making process**

Once request has been received from the MoH, the secretariat organize TITAG meeting to draft go through the Evidence to recommendation process. Additional expertise needed, from MoH, Academics or from partners, are identified and approached for their involvement. TITAG works as a team for any request - no specific working group is set up- the distribution of work between the members of the NITAG is done according to their expertise on the 7 domains of the recommendation framework. The recommendation framework is drafted to fit the specific question with the support of the secretariat. The recommendation framework includes following components which are epidemiology and disease burden, vaccine safety, efficacy and effectiveness, Global and regional consideration, programmatic and policy considerations, resources uses and economic considerations, equity, social aspects.

## ➤ **Outputs and documentation**

Recommendations are separate from the meetings minutes. Once the recommendations have been adopted by the members of the TITAG, the chairman communicates to the Minister of Health; TITAG chair signs off to Permanent Secretary of MoH in policy briefing format including a summary of evidence, recommendation, and conclusion. Since the establishment of second TITAG in 2016, the group has issued seven (7) recommendations. The list of recommendation issued by TITAG are shown in the table VI.

Table VI: Recommendations notes issued by TITAG\_ External assessment March 2023

S/No	Origin of request	Domain	disease	Recommendation notes	Year of issuance	Timeline	status
01.	Ministry of Health	Routine Immunization	Cervical cancer	Recommendation one one-dose HPV (Gardasil) quadrivalent vaccine to adolescent girls aged 9-14 years old use in Tanzania	2023	8 weeks	Pending <sup>1</sup>
02.	Ministry of Health	Health Emergency	Poliomyelitis	Recommendation nOPV2	2022	8 weeks	Implemented
03.	Ministry of Health	Health Emergency	COVID-19	Recommendation on BBV152 COVAXIN® vaccine	2022	6 weeks	Implemented
04.	Ministry of Health	Routine Immunization	Malaria	Introduction of Malaria vaccine RTS, S/AS01 for use among children in Tanzania populace	2021	8 weeks	Pending <sup>2</sup>
05.	Ministry of Health	Health Emergency	COVID-19	Recommendation on COVID-19 vaccines booster dose	2022		Implemented
06.	Ministry of Health	Routine Immunization	Acute Diarrhea due to Rotavirus	Recommendation Switch Rotarix to ROTAVAC 5 dose	2022	10 weeks	implemented
07.	Ministry of Health	Health Emergency	COVID-19	Recommendation for SPUTNIK V COVID-19	2022	5 weeks	Delayed

<sup>1</sup> document in the communication circuit

<sup>2</sup>Country yet to receive GAVI funding



## Indicator 6, Integration into policymaking process

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

*Table VII: Indicator 6, integration into policymaking process criteria met, TITAG External Assessment March 2023.*

	Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
Government consideration and solicitation	There is no defined process for the MOH to officially request recommendations from the NITAG.	x There is a defined process for the MOH to officially <b>request recommendations</b> from the NITAG. Process includes mutually agreed-upon timetable for NITAG response.	x NITAG monitors the recommendations <b>accepted</b> by the MOH.  When MOH does not accept a NITAG recommendation, a clear explanation for its refusal is provided in writing to the NITAG chair.	x If warranted by MOH's explanation for not accepting NITAG recommendations, NITAG improves process for identifying new policy questions.  NITAG considers topics suggested by the NITAG but not specifically requested by MOH, through mutually agreed upon process.	x Leading Edge will automatically fill if you select <i>Advanced</i> .	Leading Edge
Implementation	NITAG is not involved in reviewing or recommending any implementation, programmatic, or research activities.	x NITAG is involved in ad hoc basis in reviewing or recommending any implementation, programmatic, or research activities.	x NITAG requests reports or presentations on implementation efforts and vaccine coverage so members can understand if their recommendation is successful or if further considerations are necessary.	x If appropriate, NITAG makes <b>evidence-based programmatic recommendations</b> (e.g. regarding logistics, delivery, access, vaccine hesitancy, etc.)	NITAG is involved in setting the policy agenda; i.e., recommendations for R&D, recommendation for filling gaps in programmatic implementation).	Advanced
OVERALL MATURITY LEVEL FOR THIS INDICATOR						<b>Advanced</b>

TITAG is considered at the advanced level of maturity for the indicator integration on policy making process.

### ➤ Government Consideration and solicitation

TITAG works based on an official request from the Ministry of Health addressed to the chairperson. From then, the whole TITAG is involved with the development of the technical note of recommendation. Additional priority topics have been identified this year by the members for self-referral question such as Hepatitis B birth dose and updates on the Malaria vaccine recommendation.

### ➤ Implementation

As of to date, delay in implementing recommendations remains for one COVID-19 vaccine: Sputnik V. The internal procedures manual does not include a mechanism for monitoring recommendations implemented by the Ministry of Health; however, the IVD Program team updates the TITAG members on the progress of the vaccination program implementation during regular meetings. In the recommendation notes, the TITAG identifies the gaps on evidence and recommends ways to address them.

## Indicator 7: Stakeholder's recognition

Table VIII shows the level of maturity for indicator stakeholders' recognition of TITAG

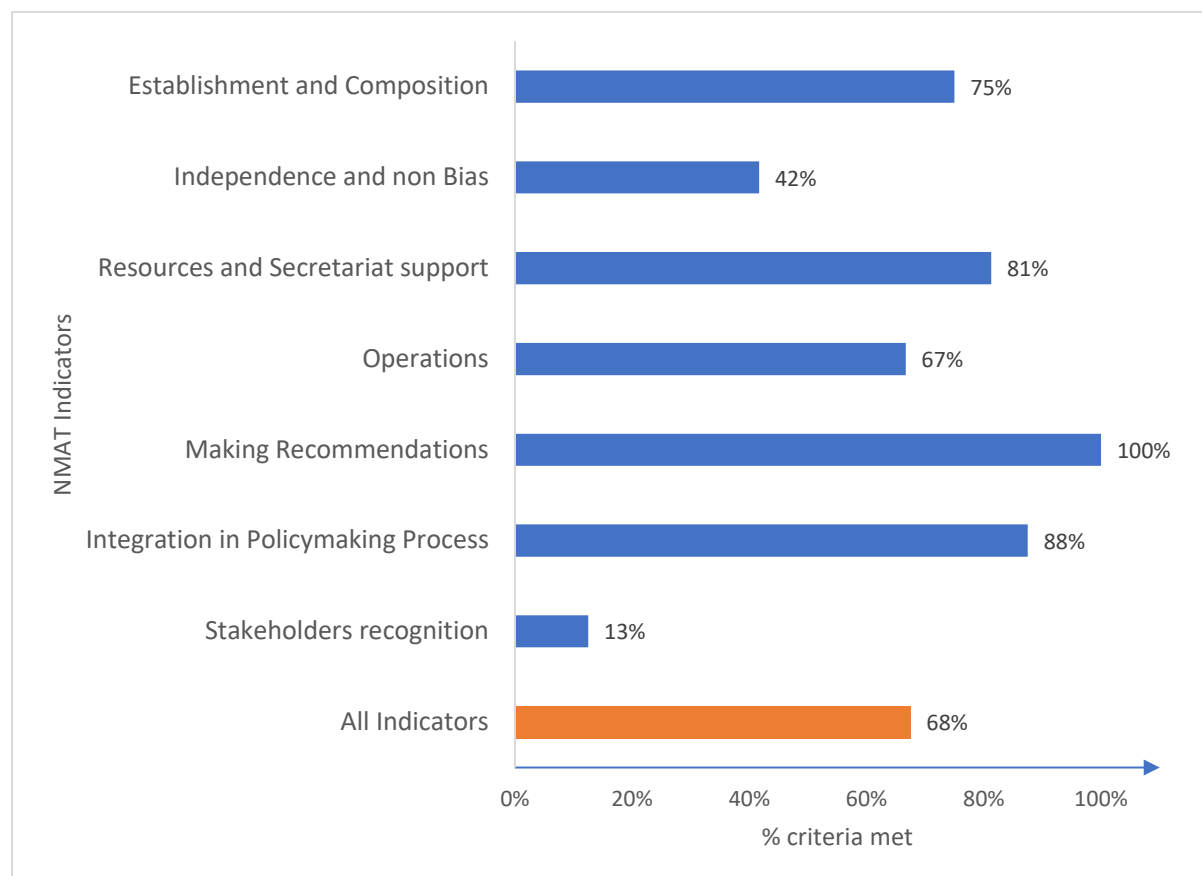
*Table VIII: Indicator, stakeholders recognition criteria met, TITAG External Assessment March 2023.*

	Basic	Developing	Intermediate	Advanced	Leading Edge	RESULTS
Relationship with Stakeholders	N/A Stakeholders and partners in the community are not aware of the NITAG.	X Members of the scientific and professional community are aware of the NITAG's role and activities.	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 partner expertise and focus.	Developing
Public Recognition	x NITAG member names are not publicly available.	NITAG member names are publicly available.	NITAG chair is allowed to be interviewed in public media in his/her capacity of NITAG chair.	Members are co-authors or acknowledged in publications (peer-reviewed or non-peer-reviewed) of recommendations stemming from NITAG work.	Members are authors on peer-reviewed publications for research or recommendations stemming from NITAG work.	Basic
OVERALL MATURITY LEVEL FOR THIS INDICATOR						Basic

The TITAG has been considered as basic level of maturity on the indicator 7 on stakeholders' recognition. It is already planned by TITAG to document their work so far for publication during year 2023. TITAG members from academies and research institutions belong to scientific societies and are known by their peers. The members of the scientific societies of the place are called individually if their expertise is required in the working groups of the NITAG. However, there is no formal platform for exchanges and communication of activities and dissemination of TITAG recommendations at the national level. The Tanzania NITAG since the end of 2022 regularly shares its recommendations with the WHO for dissemination on the GNN website.

## Assessment Rating Summary

The table IX shows the overall criteria met by TITAG



*Figure 1; Overall rating of assessment criteria, TITAG External Assessment, March 2023*

Establishment, secretariat support, making recommendation, and integration into policymaking process scored the highest while the remaining indicators require attention for further improvement.

## Strengths

- Commitment of the TITAG members, supported by a strong and skilled secretariat, has sustained the functionality of the TITAG with a shortened timeline in delivering their recommendation note to the MoH.
- TITAG has followed procedures has standard evidenced based recommendation provision process, involvement of external expertise as required.
- Experience gained by the TITAG members through their term is contributing ably to the decision-making process and transfer skills to the new or co-opted members.
- TITAG members responding to emergent and ad-hoc requests such as the COVID-19 pandemic in providing timely guidance to the MoH.
- Solid experience in leading the evidence to recommendations process contributing in informed decision-making for IVD
- Formalized feedback from MoH (acknowledgment letter, systematic update on TITAG recommendations implementation provide by IVD

## Challenges

The assessment identified challenges on the functioning and processes of TITAG, these are:

- Limited redundancy in the core membership to take in account life course immunization – need to expand membership to Pediatrics, Internal medicine, sexual and reproductive health.
- Declaration of interest limited to Core members – need to expand to secretariat, working groups members and external expertise
- TITAG work with limited visibility- improve through publications of their work
- Need to integrate TITAG expertise into the Research agenda within the Ministry of Health

## Best practices

- MOH systematically requesting the TITAG for recommendation to guide policy in new vaccine recommendation and Immunization program related issues including emergency vaccination response (operations feasibility etc).
- The mandate of the TITAG has been renewed periodically with updating of the Implementation procedure manual.
- Request for external expertise input through co-opting experts into working groups to address the gaps.
- Involving all NITAG members in working group.
- availability of funding and support from partners improve timeline in recommendation issuance.

## Recommendations

- Secretariat to update TITAG Annual plan taking in account the adopted improvement plan (guided by current assessment).
- NITAG Chair/IVD Program manager to share the Assessment findings with the Ministry of Health (audience with senior management of MoH)
- WHO country office to coordinate quarterly follow up call for implementation plan monitoring (secretariat to provide quarterly update prior to the call)
- TITAG members to make sure they self-evaluate themselves as needed and external evaluation to be conducted by WHO yearly.



Interview ZITAG secretariat focal person



## Priority next steps

Next steps identified and validated during the stakeholder's consensus meeting

*Table IX: Next Priority Next Steps validated\_ TITAG external Assessment March 2023.*

Indicators	Current Maturity Level	Planned Actions	Responsible Party	Deadline
<b>Establishment &amp; composition</b>	Intermediate	Expansion of membership (Internal medicine, Gynecologist, 1 more pediatrician)	MOH/IVD Program	End 2023
		Publish open advert to attract core members to join	MOH IVD Program	Q3 2023
<b>Independence &amp; Non-bias</b>	Basic	Update SOPs on Declaration of Interest and COI assessment	TITAG	Q3 2023
		Publish meeting summaries, Recommendations and IPM and any other relevant documents through a dedicated NITAG Webpage on MoH website	TITAG IVD Program	Q4 2023
<b>Resources &amp; Secretariat support</b>	Intermediate	Expand TITAG activities funding to participation on regional and international meetings (GNN, SAGE, RITAG), capacity building (vaccinology), Conduct systematic reviews and Meta-analysis	MOH/ IVD Program	Q1 2024

Indicators	Current Maturity Level	Planned Actions	Responsible Party	Deadline
		Assign a full time dedicated and skilled secretariat to NITAG work		Q1 2024
<b>Operations</b>	Intermediate	To conduct self-evaluation/ external assessment (every 2-3 years)	TITAG, WHO to facilitate	End 2024
<b>Making recommendations</b>	Advanced	N/A		
<b>Integration in policy making process</b>	Developing	MOH to involve TITAG in Health sector Research and Development agenda	MOH/IVD	Q1 2024
<b>Stakeholder recognition</b>	Basic	Increase visibility of TITAG by creation of a NITAG webpage /MoH Website	MOH/IVD	Q4 2024
		Set up communication channel with scientific societies, Health professional associations recommendations (symposium, invitation to attend meetings, attendance of events- Tanzania health summit, scientific conference)	TITAG Chairperson	Q3 2023
		Regular sharing TITAG recommendations notes/ articles for publication on the GNN website Document and Publish TITAG experience on EtR process and NITAG operations	TITAG WHO (to facilitate)	Q3 2023

## Annex 1: List of Interviewees

NAME	Function-TITAG
Prof Stephen MSHANA	Chairperson
Dr Salvatory MUKALABAMU	Core member
Prof. Gerald MISINZO	Core member
Dr Florian TINUGA	ex officio, EPI manager
Dr. Alex MPHURU	Liaison member UNICEF
Dr. Anthony KASOGO	Liaison member WHO
Dr Furaha KYESI	Secretariat

## Annex 2: data collection tool

### NITAG Maturity Assessment Data Collection Guide

Access link: [NITAG Maturity Assessment Tool \(NMAT\) | NITAG RESOURCE CENTER \(nitag-resource.org\)](https://nitag-resource.org/nmat)

