

Terms of Reference for the Advisory Group on the Bacterial Priority Pathogen List (AG BPPL)

In 2015 the World Health Assembly (WHA) adopted the Global action plan (GAP) on antimicrobial resistance (AMR)¹. The plan consists of five strategic objectives aimed at (1) improving awareness around AMR, (2) strengthening surveillance, (3) reducing and preventing infections, (4) optimizing the use of antimicrobials and (5) increasing the investment in new health products, including the research and development (R&D) of new antibiotics.

In 2017 WHO developed the first bacterial priority pathogens list (WHO BPPL), to guide investments in the R&D of new antibiotics². The list highlighted 13 bacterial pathogens as well as tuberculosis (TB). The antibiotic-resistant bacteria in the priority list were classified into three tiers: critical, high, and medium³.

Since its launch the WHO PPL has shaped the antibacterial R&D landscape, heavily influencing public and private investors and funders of R&D. The BPPL has also emerged as a tool for raising AMR awareness, informing infection prevention and control and antimicrobial stewardship interventions.

The Advisory Group on the Bacterial Priority Pathogens List (AG BPPL) will support WHO and the Unit on Impact Initiatives and Research in future revisions of the BPPL.

The Advisory Group on the Bacterial Priority Pathogens List (AG BPPL) will act as an advisory body to WHO in this field.

I. Functions

In its capacity as an advisory body to WHO, the AG BPPL shall have the following functions:

1. To provide independent scientific and technical advice to WHO for future revisions of the BPPL.
2. To provide advice and input to WHO on the criteria to be used in the prioritization exercise to update the BPPL, including criteria definitions, and levels (scores).
3. To fill knowledge gaps in the literature for the selected pathogens concerning the defined criteria for prioritization.
4. To review and analyse scientific information to update the BPPL based on the criteria established for the revision and update.
5. To review systematic reviews, provide feedback and fill knowledge gaps based on expertise.
6. Provide input to WHO as needed to inform the assignment of weights to the pathogens in the prioritization exercise.

¹ Global Action Plan on Antimicrobial Resistance:

https://apps.who.int/iris/bitstream/handle/10665/193736/9789241509763_eng.pdf?sequence=1

² Global priority list of antibiotic-resistant bacteria to guide research, discovery, and development of new antibiotics: https://www.who.int/medicines/publications/WHO-PPL-Short_Summary_25Feb-ET_NM_WHO.pdf

³ Tacconelli E, Carrara E, Savoldi A, Harbarth S, Mendelson M, Monnet DL, Pulcini C, Kahlmeter G, Kluytmans J, Carmeli Y, Ouellette M. Discovery, research, and development of new antibiotics: the WHO priority list of antibiotic-resistant bacteria and tuberculosis. *The Lancet Infectious Diseases*. 2018 Mar 1;18(3):318-27.

7. As advised by WHO, to participate and provide support and input during the future updates of the BPPL.
8. To review and provide technical advice and support to WHO on relevant publications based on the BPPL.

II. Composition

1. The AG BPPL shall have up to 18 members, who shall serve in their personal capacities to represent the broad range of disciplines relevant to AG BPPL. In the selection of the AG BPPL members, consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation and gender balance.
2. Members of the AG BPPL, including the Chairperson, shall be selected and appointed by WHO following an open call for experts. The Chairperson's functions include the following:
 - to chair the meeting of the AG BPPL;
 - to liaise with the WHO Secretariat between meetings.

In appointing a Chairperson, consideration shall be given to gender and geographical representation.

3. Members of the AG BPPL shall be appointed to serve for three years and shall be eligible for reappointment. A Chairperson is eligible for reappointment as a member of the AG BPPL but is only permitted to serve as Chairperson for one term. Their appointment and/or designation as Chairperson may be terminated at any time by WHO if WHO's interest so requires or, as otherwise specified in these terms of reference or letters of appointment. Where a member's appointment is terminated, WHO may decide to appoint a replacement member.
4. AG BPPL members must respect the impartiality and independence required of WHO. In performing their work, members may not seek or accept instructions from any Government or any authority external to the Organization. They must be free of any real, potential or apparent conflicts of interest. To this end, proposed members/members shall be required to complete a declaration of interests form and their appointment, or continuation of their appointment, shall be subject to the evaluation of completed forms by the WHO Secretariat, determining that their participation would not give rise to a real, potential or apparent conflict of interest.
5. Following a determination that a proposed member's participation in the AG BPPL would not give rise to a real, potential or apparent conflict of interest, the proposed member will be sent a letter inviting them to be a member of the AG BPPL. Their appointment to the AG BPPL is subject to WHO receiving the countersigned invitation letter and letter of agreement. Notwithstanding the requirement to complete the WHO declaration of interest form, AG BPPL members have an ongoing obligation to inform the WHO of any interests real or perceived that may give rise to a real, potential or apparent conflict of interest.

6. As contemplated in paragraph II.4 above, WHO may, from time to time, request AG BPPL members to complete a new declaration of interest form. This may be before an AG BPPL meeting or any other AG BPPL -related activity or engagement, as decided by WHO. Where WHO has made such a request, the AG BPPL member's participation in the AG BPPL activity or engagement is subject to a determination that their participation would not give rise to a real, potential or apparent conflict of interest.
7. Where an AG BPPL member is invited by WHO to travel to an in-person AG BPPL meeting, WHO shall, subject to any conflict of interest determination as set out in paragraph II.6 above, issue a letter of appointment as a temporary adviser and accompanying memorandum of agreement (together 'Temporary Adviser Letter'). WHO shall not authorize travel by an AG BPPL member, until it receives a countersigned Temporary Adviser Letter.
8. AG BPPL members do not receive any remuneration from the Organization for any work related to the AG BPPL. However, when attending in-person meetings at the invitation of WHO, their travel cost and per diem shall be covered by WHO in accordance with the applicable WHO rules and policies.

III. Operation

1. The AG BPPL shall normally meet regularly and at once a year. However, WHO may convene additional meetings. AG BPPL meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

AG BPPL meetings may be held in open and/or closed sessions, as decided by the Chairperson in consultation with WHO.

- (a) Open sessions: Open sessions shall be convened for the sole purpose of the exchange of non-confidential information and views and may be attended by Observers (as defined in paragraph III.3 below).
- (b) Closed sessions: The sessions dealing with the formulation of recommendations and/or advice to WHO shall be restricted to the members of the AG BPPL and essential WHO Secretariat staff.

2. The quorum for AG BPPL meetings shall be two-thirds of the members.
3. WHO may, at its sole discretion, invite external individuals from time to time to attend the open sessions of an advisory group, or parts thereof, as "observers". Observers may be invited either in their personal capacity, or as representatives from a governmental institution / intergovernmental organization, or from a non-state actor. WHO will request observers invited in their personal capacity to complete a confidentiality undertaking and a declaration of interests form prior to attending a session of the advisory group. Invitations to observers attending as representatives from non-state actors will be subject to internal due diligence and conflict of interest considerations in accordance with FENSA. Observers invited as representatives may also be requested to complete a confidentiality undertaking.

Observers shall normally attend meetings of the AG BPPL at their own expense and be responsible for making all arrangements in that regard.

At the invitation of the Chairperson, observers may be asked to present their personal views and/or the policies of their organization. Observers will not participate in the process of adopting decisions and recommendations of the AG BPPL.

4. The AG BPPL may decide to establish smaller working groups (sub-groups of the AG BPPL) to work on specific issues. Their deliberations shall take place via teleconference or video-conference. For these sub-groups, no quorum requirement will apply; the outcome of their deliberations will be submitted to the AG for review at one of its meetings.
5. AG BPPL members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the AG BPPL.
6. Reports of each meeting shall be submitted by the AG BPPL to WHO (the Assistant Director-General of the responsible Cluster). All recommendations from the AG are advisory to WHO, who retains full control over any subsequent decisions or actions regarding any proposals, policy issues or other matters considered by the AG BPPL.
7. The AG BPPL shall normally make recommendations by consensus. If, in exceptional circumstances, a consensus on a particular issue cannot be reached, minority opinions will be reflected in the meeting report.
8. [Active participation is expected from all AG BPPL members, including in working groups, teleconferences, and interaction over email.] AG BPPL members may, in advance of AG meetings, be requested to review meeting documentation and to provide their views for consideration by the AG BPPL.
9. WHO shall determine the modes of communication by the AG BPPL, including between WHO and the AG BPPL members, and the AG BPPL members among themselves.
10. AG BPPL members shall not speak on behalf of, or represent, the AG BPPL or WHO to any third party.

IV. Secretariat

WHO shall provide the secretariat for the AG BPPL, including necessary scientific, technical, administrative and other support. In this regard, the WHO Secretariat shall provide the members in advance of each meeting with the agenda, working documents and discussion papers. Distribution of the aforesaid documents to Observers will be determined by the WHO Secretariat. [The meeting agenda shall include details such as: whether a meeting, or part thereof, is closed or open; and whether Observers are permitted to attend.]

V. Information and documentation

1. Information and documentation to which members may gain access in performing AG BPPL related activities shall be considered as confidential and proprietary to WHO and/or parties collaborating with WHO. In addition, by counter signing the letter of appointment and the accompanying terms and conditions referred to in section II(5) above, AG members undertake to abide by the confidentiality obligations contained therein and also confirm that any and all rights in the work performed by them in connection with, or as a result of their AG-related activities shall be exclusively vested in WHO.
2. AG members and Observers shall not quote from, circulate or use AG BPPL documents for any purpose other than in a manner consistent with their responsibilities under these Terms of Reference.
3. WHO retains full control over the publication of the reports of the AG, including deciding whether or not to publish them.