



# HEALTH METRICS NETWORK TECHNICAL ADVISORY GROUP (TAG)

terms of reference, membership, methods of work (Rev 4)



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## 1. Terms of reference

**1.1** The TAG is established by the Board of the Health Metrics Network to provide independent assessment and advice on technical and managerial issues which it determines require Board attention. The Board may also direct the TAG to examine specific issues as appropriate.

**1.2** The TAG shall advise the HMN Secretariat on technical and managerial issues related to the strengthening of health information systems, including:

- Development, adaptation and implementation of the HMN Framework and associated tools.
- Development and testing of innovative approaches for health system strengthening and production of global public goods in the health information field.
- Support to country implementation and capacity-building.
- Assessment of progress towards HMN goals and objectives and monitoring and evaluation of performance.

**1.3** Specifically, the TAG shall provide input and conduct regular reviews of progress towards the implementation and refinement of the HMN goals, objectives and strategies. The scope of work for TAG shall include:

- Providing technical review and advice on the processes and the products of the activities of the HMN partnership.
- Identifying priorities and gaps in the HMN strategy and plan and advising the Secretariat on an agenda to address them.
- Advising on harmonization of support to country health information system strengthening and on dissemination of best practices.
- Regularly reviewing and critically assessing the quality and usefulness of HMN products and outputs.

**1.4** In addition, the TAG may provide support as needed to the HMN Board as well as to the HMN Secretariat, including:

- Providing input to the further development and implementation of the HMN Framework and tools.
- Providing guidance in technical resource networking related to country health information system strengthening.
- Advising on the dissemination of findings and lessons learnt from HMN country support activities.
- Strengthening inter-organizational networking, in particular coordinating with and building on efforts to enhance statistical capacities in countries.

## 2. Membership

**2.1** Candidates for TAG may be proposed by HMN Board members, by members of other HMN bodies, or by other HMN partners. The names of candidates who match the profile and qualifications defined in paragraph 2.3 below are submitted to the Consultation Committee with the appropriate information and documentation through the HMN Secretariat. The Consultation Committee, with the support of the HMN Secretariat, will recommend a proposed list of appointees to the HMN Board for decision. The confirmed appointees will be invited to become members of the TAG by the HMN Executive Secretary.

**2.2** The TAG will consist of up to 15 members. In addition to the regular TAG membership, additional experts may be invited to participate as the need arises.

**2.3** Membership of the TAG shall be drawn from a range of stakeholders, including practitioners, research institutions, academics, donor and recipient countries, and non-governmental organizations and shall be guided by the following criteria:

- Credibility and independence.
- Expertise and experience in health information systems.
- Country experience in data collection and quality assurance, with particular focus on developing countries.
- Knowledge of HMN and its activities.
- Commitment and availability to participate in meetings.
- Absence of conflict of interest.
- Geographical representation.
- Gender balance.



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**2.4** The disciplines considered essential for the TAG include public health, epidemiology, demography, statistics, social sciences (including behavioural sciences, operations research etc.), disease surveillance and response, information communication and technology, data and policy analysis, information dissemination, health accounts and cost-effectiveness, programme management including health management information systems (HMIS), and issues related to development, such as poverty reduction strategies, sector wide approaches and harmonization. The members will ensure that the TAG provides fully independent advice and assessments to the HMN Board and Secretariat.

**2.5** Members of the TAG shall normally serve for a period of two years, and shall be eligible to serve not more than two consecutive terms. After the first full term of a member, the rotation of members shall be such that approximately one third of the membership is changed every year.

**2.6** In the event that a TAG member is unable to attend a meeting, he/she will exceptionally be able to designate a replacement subject to prior approval of the TAG.



## 3. Methods of work

### 3.1 Chair

**3.1.1** The TAG Chair shall be elected by the TAG members from among its membership. The rules regarding the length of appointment set out in 2.5 above apply equally to the Chair. In the identification of the Chair, appropriate consideration shall be given to geographical representation, discipline, skills and expertise, and gender.

**3.1.2** The TAG Chair serves as an ex officio member of the HMN Board.

### 3.2 Meetings

**3.2.1** The TAG will have at least one formal meeting each year. A simple majority of the members shall constitute a forum. Additional meetings may be scheduled if the need arises. Sub-groups of the full TAG may be convened by the Chair in consultation with the Consultation Committee and the Secretariat on an ad hoc basis to consider specific issues. In addition, other means of communication (e.g. electronic discussion groups, video conferencing) will be used to facilitate exchange of views between formal meetings and arrangements will be made for regular access to relevant information.

**3.2.2** TAG members will normally be notified two months in advance of meetings and will be sent relevant documentation one month prior to the meeting.

**3.2.3** TAG members must sign a declaration on conflict of interest and abide by its provisions and philosophy throughout their deliberations.

**3.2.4** Travel and per diem for TAG and its sub-group(s) members are provided through HMN.



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## 3.3 Reporting

**3.3.1** A written summary of the meetings shall be issued within one month of the close of the TAG meeting by the TAG chair. This summary shall be distributed to all TAG members and made available to HMN Board members, all members of HMN Committees and the HMN Secretariat. The TAG Chair shall be invited to meetings of the HMN Board and shall at each meeting of the Board present brief independent assessment on performance and status of HMN activities to the Board, based on the TAG mandate. Recommendations from the TAG are advisory to, not binding on, the HMN Board and the Secretariat. HMN Committees will have no authority to amend TAG recommendations to the HMN Board or Secretariat

**3.3.2** A summary of TAG activities and main recommendations shall be included in the annual report prepared by the HMN Secretariat, which shall be prepared in consultation with the TAG.

## 3.4 Secretariat

**3.4.1** The HMN Secretariat will serve as the secretariat to the TAG, in particular with regard to the arrangements for TAG meetings, sending of invitations and providing logistic support. In addition, the HMN Secretariat may be supported by an external institution which will also make additional arrangements as required to support specific functions of the TAG such as the creation and servicing of electronic discussions groups, the preparation of reviews or analytical summaries of existing work and experience in support of the work of the TAG. The supporting institution will be selected through an independent search based on expertise, logistic and cost considerations by the Secretariat. The work carried out to support the TAG will be under the oversight of the chair of the TAG.

[www.healthmetricsnetwork.org](http://www.healthmetricsnetwork.org)



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