

## Task force on Retooling 17 March 2006

### Rationale:

For many years, there has been limited innovation in the field of TB drugs, vaccines or diagnostics. However, according to the Global Plan to Stop TB 2006-2015, within the next 10 years and beginning as early as 2008, there will be a continuous pipeline of new and improved products for TB prevention and control. Adoption and timely introduction of these tools, as they become available, will require coordinated action by various members of the Stop TB partnership. This process of preparing for adoption and introduction of new diagnostics, drugs and vaccines, has been termed "retooling".

### Composition and terms of reference of the Task Force on Retooling

The STOP TB Partnership is establishing a Task Force on Retooling (TFR) in response to a request from members of the Coordinating Board. The initial core group of the task force will include experts, not necessarily working group members, designated by the Chairman of the working groups, as well as members from key subgroups (laboratory, GDF, poverty). The membership should also include representatives from high burden country National TB Programs (NTP) as well as from the WHO stop TB department. As different issues are addressed, the TFR will draw on external expertise that can be brought into the task force in a time-limited manner. The make-up of the core group may change as retooling experts external to the TB community are identified and engaged. Initially, the TFR will be chaired by the a technical expert from one of the working groups.

### **The terms of reference of the TFR are the following:**

- To determine and evaluate the current state of development of new products in the pipeline of the "tools" WGs (Vaccines, Drugs and Diagnostics) and develop a road map for introduction and adoption of new tools, as they become available. Availability will be considered for regulatory approved tools and a plan to address their prompt approval for adoption in countries will be developed;-
- To have further role even after introduction and adoption. Activities beyond it such as monitoring and evaluation on new tools including interactions between new tools might be considered;
- To cut across the working groups of the Stop TB Partnership to ensure efficient progress in moving new tools from successful trials to standard practice in the field;
- To contribute to current and ongoing activities for safety and efficacy evaluations of new tools;

- To prioritize TB research efforts to ensure they correspond to the need of the NTP. To play a role in setting up communication systems to ensure that key partners such as NTP managers and consumer groups are informed about the upcoming tools in a timely manner to get their support and input in identifying and addressing issues related to the uptake of new tools;
- To identify and mobilize resources (human, financial and material) that would promote the development of new tools;
- To proactively identify activities and progress towards retooling currently underway by other disease control communities (e.g. malaria, immunizations), to learn lessons and maximize efficiency;

Issues to be considered will include, but are not limited to, policy change to support the adoption of new tools (e.g. WHO as normative UN specialized public health agency), the role of the GDF and other pooled procurement mechanisms, regulatory issues at global and country levels, supply, distribution and training at country levels, demand generation, etc.

Time frame:

As innovation will be continuous for years to come, the task force will be a long term working committee of the Partnership. However, membership and scope of task will change depending on actual products and timeframes for introduction.