

## Terms of Reference

### GFEP Technical Working Group

#### Background

Field Epidemiology Training Programs (FETPs) have been one of the most successful interventions aimed at strengthening the global public health workforce and are currently operational in more than 85 countries. During the more than 40 years of FETPs, multiple stakeholders have been involved in field epidemiology training, either directly or indirectly, yet their efforts were often focused on individual countries or a specific professional group. In addition, there was increasing recognition that the creation of successful, sustainable FETPs required not just didactic training, but also multi-disciplinary and trans-sectoral coordination and holistic support to capacity building within public health institutions and systems.

Recognizing these needs, in 2023, the United States Centers for Disease Control and Prevention (US CDC), the Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET), the World Health Organization (WHO), and other stakeholders established The Global Field Epidemiology Partnership (GFEP). GFEP is a network of national, regional and global organizations representing government agencies, non-governmental organizations (NGOs), academic, philanthropic and private sectors, bilateral and multi-lateral partners with tangible objectives, deliverables, performance measurement, governance, and day-to-day coordination mechanisms to fulfil its Vision and Mission.

GFEP's technical activities are supported by Technical Working Groups (TWGs). The objectives of TWGs are twofold:

1. To lead the implementation of technical initiatives supporting GFEP's mandate
2. To serve as an advisory body to the Steering Committee, providing technical and analytical input within a specified thematic domain, to ensure evidence-based recommendations and data-driven decision-making to GFEP's strategy.

TWGs provide a forum for subject matter experts from member organizations to come together and discuss the complex challenges facing the field epidemiology community. The different experiences and perspectives offered by members in the TWG discussions will be vital to ensure that any outputs produced are relevant for the wider field epidemiology community. It is important that the TWGs do not work in isolation but instead engage with, and build on, the work that various field epidemiology stakeholders have been engaged in to address these challenges.

## Thematic areas

Initially, the GFEP Steering Committee will convene the following thematic TWGs:

1. FETP institutionalization
2. Field epidemiology career pathways
3. Field epidemiology competencies
4. Credentialing
5. Measuring the impact of FETPs
6. Resource mobilization

New TWGs may be formed and existing TWGs may be dismissed by the Steering Committee based on GFEP's needs, dynamics of the global health landscape, and input from GFEP's members.

## TWG Composition

TWGs may comprise up to 20 people total, including up to 15 from GFEP member organizations and up to 5 TWG Technical Experts from non-GFEP member organizations or independent experts. One person, selected by TWG members, will serve as the chairperson in each TWG.

### *TWG members from the GFEP member organizations*

Each TWG will have up to 15 members from GFEP member organizations, including the Steering Committee, Secretariat, or Secretariat Advisory Group, who shall serve in their personal capacities as subject matter experts (SMEs) to represent a broad range of expertise relevant to the thematic work of the TWG. TWGs may include multiple members from a single organization, but members of any single organization may comprise no more than 20% of the total GFEP members in the TWG. For example, if a TWG has 15 GFEP members, no more than 3 can come from any single organization. The same person may serve simultaneously as an SME in not more than 2 TWGs.

No member of the TWGs shall receive, directly or indirectly, any salary, compensation, or emolument for this work. Active contribution implies attendance (>70%) and participation in meetings, as well as contributions to tasks and projects. The GFEP Steering Committee, in consultation with the TWG chairperson, may request a member to withdraw if such requirements are not met. Approximate time commitment will differ by TWG but may be 8-40 hours per quarter.

Members are expected to have a high level of personal and professional integrity, work inclusively, and bring a broad perspective to issues rather than solely that of a particular partner.

If any conflicts of interest arise for members during their involvement with the TWGs, these should be declared to the GFEP Secretariat ([info@gfep.info](mailto:info@gfep.info))

### *TWG members from non-GFEP member organizations*

TWGs may also include “TWG Technical Experts”, who may be either independent SMEs or SMEs from non-GFEP-member organizations, to enhance the success of the TWG. TWG technical experts will not count towards the maximum of 15 GFEP members in any TWG. Not more than one person from the same organization may serve on a TWG.

### *Chairperson responsibilities*

For the initial TWGs, the TWG chairperson will be selected from among the TWG members.

The chairperson will have the following functions:

- Scheduling the TWG meetings and setting the agenda
- Chairing the TWG meetings (or nominating appropriate meeting chairs from among the TWG members if they are unavailable).
- Holder of overall TWG accountability, overseeing and driving the work produced by the TWG, including identifying and mitigating challenges in the development of work.
- Updating the Steering Committee on the progress achieved.
- Liaising with the Secretariat as needed.
- Liaising (with the support of the Secretariat) with the other TWG chairpersons to understand the work being developed in each group, identify areas of mutual benefit, and to avoid any overlaps.

### *TWG Member Responsibilities*

TWG members are responsible for:

- Attending TWG meetings (at least 70%).
- Providing input into the TWG’s work-plan and technical discussions.
- Contributing to the substantive work of the TWG’s activities such as research, analysis, and report writing as outlined by the chairperson, as well as engagement with other TWG members to progress the designated work.

In some situations, a person may be invited to serve as a TWG member for just a 1-2 meetings and would not be expected to adhere to the above requirements.

### *Voting*

In some cases, TWGs may need to make decisions through voting. Both TWG members of GFEP organizations and TWG Technical Experts may vote if they have:

- Served on the TWG since its inception or for at least 6 months
- Have attended at least 70% of the TWG meetings during that period

## **TWG Support from GFEP**

### *Secretariat Role in Supporting TWGs*

GFEP's Secretariat will have the following functions:

- Providing project management support to TWGs.
- Providing administrative support (scheduling, meeting minutes, etc.) to TWGs, where required.
- Secretariat members may also serve as member(s) of TWGs, where appropriate.
- Convening the chairpersons of each TWG to ensure alignment and prevent overlap between TWGs.

### *Secretariat Advisory Group Role in Supporting TWGs*

GFEP's Secretariat Advisory Group will have the following functions:

- Advising the Secretariat to review and approve TWGs' technical outputs.
- Secretariat Advisory Group members may also serve as TWG members where appropriate.

### *Steering Committee Role in Supporting TWGs*

The SC will be responsible for approving the outputs of the TWGs.

## **TWG member selection process**

GFEP will announce an open call for membership applications to the thematic TWGs. Interested applicants will need to submit the required documents as outlined in the open call. For each member, the focal point for their organizational membership in GFEP must be aware of and approve of their application to participate in the TWG. GFEP encourages equity, diversity and inclusion in the TWGs. The GFEP Secretariat will review the applications and conduct a short-listing of applicants per thematic group. If more than 15 GFEP members or more than 5 TWG Technical Experts express interest to participate in a specific TWG, the Secretariat, in collaboration with the Secretariat Advisory Group, will decide on the final constitution of the TWG based on a) participation of the entity in other TWGs, b) diversity of representation of entity types, c) geographical representation, and d) gender balance. The short-listed applications will be presented to the Steering Committee for approval. In case of vacant seats in the TWG(s), the Secretariat, in collaboration with the SAG, will present additional membership application(s) to the TWG(s) Chair(s). The Chair(s) will approve new members based on 2/3 of the votes of the current TWG members.

## **Duration of TWGs**

TWGs will remain in place for the duration of the current workplan, until the outputs are completed, or the Steering Committee decides to dismiss them.

### **Withdrawing from TWG membership**

If a TWG member is no longer able to contribute to a TWG and wishes to withdraw, they are requested to notify both the TWG chairperson and the GFEP Secretariat by email.

The TWG chairperson and the Secretariat will then consider opening a recruitment call to fill the vacant role on the TWG. Alternately, they may consider selecting a replacement from the pool of applications received initially.

### **Ways of Working**

Dedicated time should be provided during meetings for members to discuss the thematic areas, consider ad-hoc issues and brainstorm ideas and solutions, as well as to discuss how the TWG will progress and contribute to the wider strategic landscape for field epidemiology. It is important that the TWGs do not work in isolation but instead engage with, and build on, the work that various field epidemiology stakeholders have been engaged in to address these challenges.

Meetings will primarily be held virtually. The bi-annual GFEP Forum may provide an opportunity for in-person TWG meetings, where funding allows.

Sub-working groups may be formed by the chairperson to lead aspects of the substantive work.

Chairpersons for all 4 TWGs should meet with the Secretariat ahead of the first TWG meeting to discuss overall management. The TWG Chairpersons may meet regularly to discuss objectives, outputs and identify synergies between TWGs.

TWG's Deliverables are first reviewed by the Secretariat and SAG, then sent to the Steering Committee (SC) for approval. The SC may approve ToR deliverables via electronic voting without convening a session. The Secretariat will act as the convener across the TWGs to ensure alignment of activities.

### **Adoption of the Terms of Reference, Amendments, Work-plan, and Deliverables**

At its first date of convening, TWG members will review and discuss the objectives and deliverables set out in the TOR for their thematic TWG. Proposals for amendments to the TWG's objectives and deliverables shall be submitted in writing to the Secretariat. The objectives and deliverables shall be reviewed and agreed by the TWG members following feedback from the Secretariat, as required.

The TWG will jointly draft and agree an annual work-plan with key milestones within the first 3 months of its existence, with the support of the Secretariat. The TWG will regularly monitor the work-plan implementation. The Chairperson will have overall responsibility for the work-plan and will report the progress achieved at the Steering Committee's biannual meetings.

If any TWG is not able to meet and progress on its objectives and deliverables, the Secretariat may have a meeting with them to discuss roadblocks and provide additional support if needed, such as having a Secretariat, or Secretariat Advisory Group, member serve as a penholder. Ongoing roadblocks may be escalated to the Steering Committee.

Once deliverables are prepared, they will be reviewed jointly by the Secretariat and SAG until all three parties (the TWG, the Secretariat, and the SAG) agree that they are ready to share with the SC. At that point, they will be presented to the SC for voting approval, either at a regularly-scheduled meeting or at an ad-hoc meeting.

### **Information and documentation**

All documents used, managed, and produced by the TWGs shall be stored in a dedicated area on a shared site managed by GFEP. TWG members are encouraged to openly share information that may be useful for the TWG's work. TWG members should advise colleagues in the TWG if any information should be treated as confidential. Confidential documents will have their access restricted to TWG members only.

### **Publications**

Any reports or publications generated by the TWGs will recognize the contributions of group members in authorship. Prior to any public dissemination, or submission to an academic journal, work produced by the TWGs must be reviewed by the Secretariat Advisory Group and the Steering Committee.

### **Thematic areas**

For each of the TWGs below, the objectives and deliverables have been identified as being critical to the TWG activities. However, it is up to each TWG to determine the best approach to achieve the objectives and deliverables, determine a feasible and realistic timeline, and develop a 2-year work-plan in their first 3 months of existence. TWGs may identify and work on new deliverables, provided that they align with the GFEP Theory of Change and are submitted to the GFEP Secretariat for approval.

The specifics for each of the initial TWGs are listed on the following pages.

## TWG for FETP institutionalization

### Context

Institutionalization of FETPs into a national health system structure helps to ensure that FETPs are contributing to protecting a population's health, rather than existing as isolated programs. Institutionalization and integration can also lead to better coordination and collaboration between FETP graduates and other public health workers, ultimately improving the efficiency and effectiveness of public health responses. It ensures there is dedicated staff to run the various program activities like trainee selection, mentorship, trainers, field supervisors, monitoring and evaluation, and certification of learning.

Being institutionalized - that is, being a formalized program of a government ministry or institute - can also provide a path for FETPs to secure the necessary funding to sustain themselves from public budgets. When FETPs are not institutionalized, there is a risk that funding will be cut or resources will be diverted to other areas, making it difficult for FETPs to continue operating. By institutionalizing FETPs, governments and other stakeholders can commit to long-term funding and support, ensuring that FETPs continue to operate and provide valuable training.

### Objectives

- To identify and develop tools and resources to support countries to implement national institutionalization roadmaps with a One Health lens.
- To develop documentation that links the institutionalization of FETPs to other relevant initiatives supporting the development of public health systems and workforce (e.g. IANPHI, Public Health and WHO Emergency Workforce Roadmap, Joint External Evaluations, NAPHS)

### Deliverables

- Gap analysis using identified, existing tools and resources developed by partners to support the institutionalization of FETPs
- Framework (comprehensive package of tools and resources) to support for FETPs' institutionalization, including how to increase utilization of FETP graduates in the national public health system
- Report outlining the links between the institutionalization of an FETP and other public health workforce and health system strengthening initiatives.

## TWG for field epidemiology career pathways

### Context

While primary healthcare workers have formally recognized career paths globally, the position of “field epidemiologist” is not recognized as a formal career path in many countries. Moreover, the title “epidemiologist” is not listed as an explicit occupation in the International Standard Classification of Occupations of the International Labor Organization. As a result, a clinician, nurse, or public health specialist who has undergone field epidemiology training may not have an opportunity to be employed as an “epidemiologist” or “field epidemiologist”. There is often no structured career path for FETP graduates within the MoH, forcing them to either return to the same job they were performing before entering the FETP or to work outside of the MoH. GFEP will analyze existing gaps in professional career pathways for field epidemiologists and will develop a framework that can be used to improve career pathways both internationally and at the country-level.

### Objectives

- To identify existing gaps in professional career pathways for field epidemiologists.
- To develop a framework to support career pathways for field epidemiologists at a national and international level.
- Advocate for the recognition of ‘field epidemiologist’ under the international standard classification of occupations (ISCO).

### Deliverables

- Gap analysis identifying gaps in professional career pathways for field epidemiologists.
- Framework to support career pathways for field epidemiologists at a national and international level.
- ISCO advocacy mechanisms identified and a proposal developed for the inclusion of a field epidemiology category under the ISCO.

## TWG for field epidemiology competencies

### Context

All field epidemiology training programs are competency-based, meaning that these programs provide training and experience that enable the trainee to demonstrate competence as a field epidemiologist. Whilst FETPs generally have broad competency areas in common, national and regional programs have developed their own relevant curricula and competencies based on public health and workforce needs. Beyond human health-related competencies, there has been increasing focus on the development of One Health competencies, without agreement on which One Health competencies are relevant for field epidemiologists. Local variation in curricula and training methods are critical to ensure that programs remain relevant to contextual public health needs. However, the field epidemiology community has also recognized the need for an international standard minimum set of competencies that are agreed globally and ensure the quality of graduates at each FETP level, including One Health-relevant competencies.

### Objectives

- Develop a standard minimum set of competencies for field epidemiologists, in collaboration with global experts.

### Deliverables

- Framework outlining minimum set of core competencies (including One Health competencies) for field epidemiologists by training tier (frontline, intermediate, advanced).
- Identification of an approach to assess these competencies

Due to the clear overlap between credentialing and competencies, the Chairperson of this TWG and the Chairperson of the credentialing TWG will be expected to liaise closely throughout their processes. This close coordination will be facilitated by the Secretariat.

## TWG for credentialing of field epidemiologists

### Context

Credentialing is a way to validate the competency of field epidemiologists and ensure that all are held to the same global standards. Whilst TEPHINET provides accreditation for programs, currently there is no globally agreed set of individual competencies by which trainees can be credentialed. A globally agreed set of minimum competencies would support the international credentialing of field epidemiologists, thereby supporting the development of their career pathways.

### Objectives

- Develop a plan for an internationally recognized mechanism for credentialing field epidemiologists.

### Deliverables

- Analysis paper outlining possible credentialing mechanisms and processes for field epidemiologists, outlining advantages and disadvantages of each mechanism and making a recommendation as to the best approach.

Due to the clear overlap between credentialing and competencies, the Chairperson of this TWG and the Chairperson of the competency TWG will be expected to liaise closely throughout their processes. This close coordination will be facilitated by the Secretariat.

## TWG for measuring the impact of FETPs

### Context

Demonstrating the impact of FETPs is critical to show the value of this training in supporting public health outcomes both nationally and internationally. For several reasons, data on the impact of FETPs are scarce. First, it is challenging to measure events that do not occur (outbreaks that are prevented or do not expand due to having field epidemiologists to detect and control the outbreak). Second, strong field epidemiology capacity typically increases the number of outbreaks detected rather than the opposite, which can make it look like the situation worsens in the presence of such capacity. Third, public health outcomes are influenced by multiple factors, making it difficult to isolate program-specific impact. Finally, the impact may be reflected in longer-term effects or context-specific outcomes that are not measurable immediately after implementation. Whilst recognizing these challenges, it is important that the field epidemiology community continues to develop appropriate impact measurement methodologies to support the recognition, institutionalization, and sustainability of FETPs globally. This TWG will support a critical review of multiple existing FETP impact measurement methodologies to develop an optimal impact measurement framework. In addition to FETP impact methodologies, the TWG will support the development of self-evaluation tools to help FETPs maintain continuous quality improvement and will commission regional and cross-regional thematic evaluations and implementation research to systematically identify and address common operational bottlenecks in FETPs' performance. Furthermore, the TWG will support the development of appropriate workforce estimation tools for field epidemiologists, to help countries understand and plan for their training needs.

### Objectives

- Review existing impact measurement methodologies
- Develop and pilot an impact measurement framework for FETPs
- Develop a self-evaluation tool that FETPs can use to support continuous quality improvement
- Identify and conduct thematic evaluations to help address bottlenecks in FETPs' performance
- Develop tools to estimate applied epidemiology workforce targets

### Deliverables

- A review of current impact measurement methodologies
- An impact measurement framework for FETPs
- A self-evaluation tool for FETPs
- Thematic evaluations related to FETPs' performance
- A conceptual framework to support countries and regions to develop data-driven, context-specific field epidemiology workforce targets.

## TWG for resource mobilization to implement GFEP Strategy

### Context

Despite being one of the most successful capacity building mechanisms in global health for almost 40 years, FETPs remain largely unfunded. Because national governments of most low/middle-income countries are unable to allocate sufficient levels of domestic budgetary funds, FETPs remain dependent on external financial support. Over half of the total funding for FETPs is still allocated by the U.S. government, mainly through CDC. A small number of other international funders, mainly the Global Fund and Pandemic Fund, recently started investing in FETPs. However, their investments have been at a lower scale than needed. A survey implemented by TEPHINET in 2022 indicated that the number of residents and fellows enrolled in FETPs are determined more by budget availability (i.e. how many trainees can FETPs afford) than by public health workforce needs in the country or by requests from Ministries of Health or by National Public Health Agencies. In addition to the limited direct investments in FETP, there has been insufficient funding to support core cross-cutting activities implemented by TEPHINET and Regional Networks in support of FETPs, such as quality assurance, curriculum development, network coordination, etc. Funding is also necessary for implementing strategic activities prioritized in the GFEP's strategy, such as for supporting the GFEP's Secretariat. Unless resources are identified, the implementation of GFEP's strategy and the Secretariat's sustainability remain at risk.

### Objectives

The main objective of the Technical Working Group on Resource Mobilization is to support GFEP in mobilizing necessary resources for its operations, including the implementation of GFEP's strategy and supporting the GFEP's Secretariat's sustainability to ensure uninterrupted day-to-day management and coordination of the partnership. The TWG will also develop an approach for scaling up direct investments in FETPs through increasing domestic allocations and diversifying external funding resources. By creating this TWG, GFEP acknowledges that the Secretariat alone will not be able to mobilize resources for GFEP. The Secretariat needs active support from the Steering Committee. However, additional work is also needed to prepare a practical resource mobilization strategy for the Steering Committee and for the Secretariat, which can be used as a step-by-step guide for identifying, approaching, and convincing donors to increase investments in field epidemiology capacity strengthening.

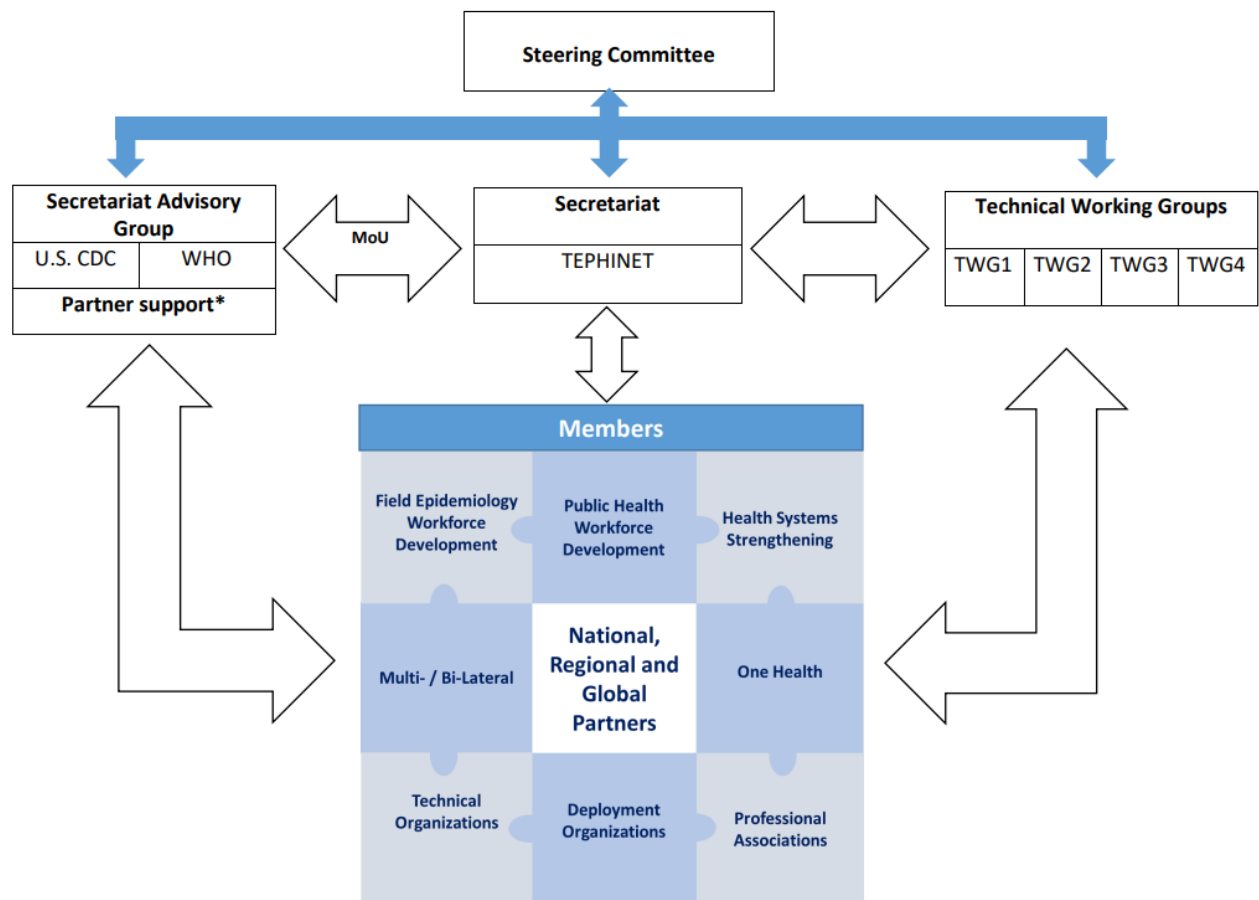
### Deliverables

GFEP's Resource Mobilization Strategy, including but not limited to:

1. Needs assessment for implementing GFEP's strategy based on costing strategic activities and the operational workplan;
2. Assessment of annual cost for sustaining the Secretariat;

3. Mapping major donors' priorities and preparing brief summaries on donor-specific approaches for funding advocacy, including:
  - (i) Bi-lateral donors: U.S. CDC, USAID, PEPFAR, DTRA and other US government agencies, development assistance programs of other countries – Germany, France, UK, Japan, Australia, the Gulf countries and other countries;
  - (ii) Multi-lateral donors: The Global Fund, Pandemic Fund, World Bank, Regional Development Banks, UN agencies and others;
  - (iii) Private foundations and private sector donors, including: the Bill and Melinda Gates Foundation, the Rockefeller Foundation, private sectors' corporate social responsibility mechanisms and others;
  - (iv) Analysis of non-traditional donors (e.g. emerging markets, high-net-worth individuals, membership fees etc)
4. Practical recommendations for political advocacy
5. Practical recommendations for technical advocacy
6. Costing investment needs for sustaining TEPHINET-registered FETPs to fill the gap of trained field epidemiologists in LMICs.

## Annex: GFEP Structure



\*In 2024-25, UKHSA providing partner support to the SAG