Independent Panel on Evidence for Action Against Antimicrobial Resistance
Final Draft Terms of Reference for Public Discussion
Wellcome Trust Consultation Response*

We welcome the focus given by the Tripartite towards the implementation of the IACG global governance recommendations. The establishment of the Independent Panel on Evidence for Action Against Antimicrobial Resistance as laid out in the IACG recommendations is key to the successful implementation of the wider IACG recommendations and overall progress on antimicrobial resistance (AMR).

Below we outline some comments on the draft Terms of Reference.

General comments:

1. **Purpose** Key to the success of the Panel will be the relevance of its recommendations. 
   **Proposed amendment:** Wellcome is of the view that the purpose section should be amended to highlight the importance of generating relevant recommendations which set the frame for global action on AMR, using overall burden of AMR and generating trajectories of current interventions as examples of how this could be achieved.

2. **Diversity** It is essential that diversity is considered in the selection of the Independent Panel because representation in public and academic settings is important. Wellcome acknowledges that personal identity is complex and that not all aspects of diversity are visible. Nevertheless, we would strongly encourage the promotion of a diverse group of panel members, in particular considering race and ethnicity, gender, career stage, geography and sector. We also support proposals which thoughtfully consider diversity in this way across the membership of the main panels and ad-hoc groups.

3. **Transparency, peer review and open access** Wellcome supports the proposals to ensure a transparent and rigorous peer review process of reports, and that all outputs should be available through open access publication. It is essential that the Tripartite secures appropriate funding to cover the human resources required to review, consider and address comments received through peer review which could be extensive.

4. **Relationship to Member States** Whist it is essential that the panel is independent and politically neutral, Member States are a key stakeholder in respect to the uptake and implementation of the recommendations/outputs from this panel. It will be important for the Panel to develop a robust mechanism to engage Member States in the process in an appropriate way to secure an ongoing mandate, and we welcome the ‘comprehensiveness and inclusivity’ guiding principle as well the clear direction for the Panel to communicate with governments and other stakeholders. 
   **Proposed amendment:** The operational guidance section should be strengthened to specify engagement with Member States as a key function to be defined by the panel.

5. **Chair and Vice Chair** ‘One Health’ representation is a key principle throughout the terms of reference. Wellcome is of the opinion that the Chair and Vice Chair appointments should follow the same principle to ensure diversity of representation. There should be clear accountability assigned to both the Chair and Vice Chair roles.

6. **Structure and membership** The Terms of Reference suggest 10-15 panel members. Wellcome is of the opinion that a panel of 15 risks being too large to function effectively. 
   **Proposed amendment:** We believe that draft ToR should require a clear justification for
increasing membership above 12. If the panel does exceed 12 members, the panel should be required to take steps to address this in future recruitment rounds, identifying possible members who are able to cover multiple areas of expertise and thus reduce the panel size back to 12.

**Transparency** is a guiding principle of the panel but there is limited information for how this is achieved. This should be a key function listed in ‘operational guidance’ section of the draft Terms of Reference.

**Time bound:** The Terms of Reference suggest that the panel can establish working groups which are time bound however there is no mention as to what this timeframe should be. Wellcome suggests working groups are initially established for a period of up to two years, with extensions (no more than an additional two years without further review) to be considered and agreed upon by the Panel.

**Communications:** Wellcome considers communication to be a key function of the Panel’s responsibility and therefore fully support the inclusion of the ‘communication with governments and other stakeholders paragraph. If reports are simply published with no plans to communicate the findings with stakeholders then it is likely that recommendations and the Panel will fail to have impact. Panel members should be clear about their responsibilities to support the dissemination and communication of reports and the Panel should devise clear communications strategies around each of its publications, including how they will target those stakeholders who should have an interest in any specific recommendations of a report.

*Declaration of Interest: Edward Whiting, Director of Strategy, Wellcome Trust chaired the Advisory Group convened by the Tripartite Secretariat to develop these draft Terms of Reference.*