

# WHO Global Benchmarking Tool

**Committee on Stronger Food and Drug  
Regulatory Systems Abroad  
January 9 2019**

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WHO Geneva



## Regulatory System Strengthening Program

WHO began program of benchmarking and strengthening regulatory systems in 1997, beginning with vaccines programs

Importance of strong, efficient regulatory systems recognized by WHA Resolution 67.20 – Regulatory System Strengthening for Medical Products

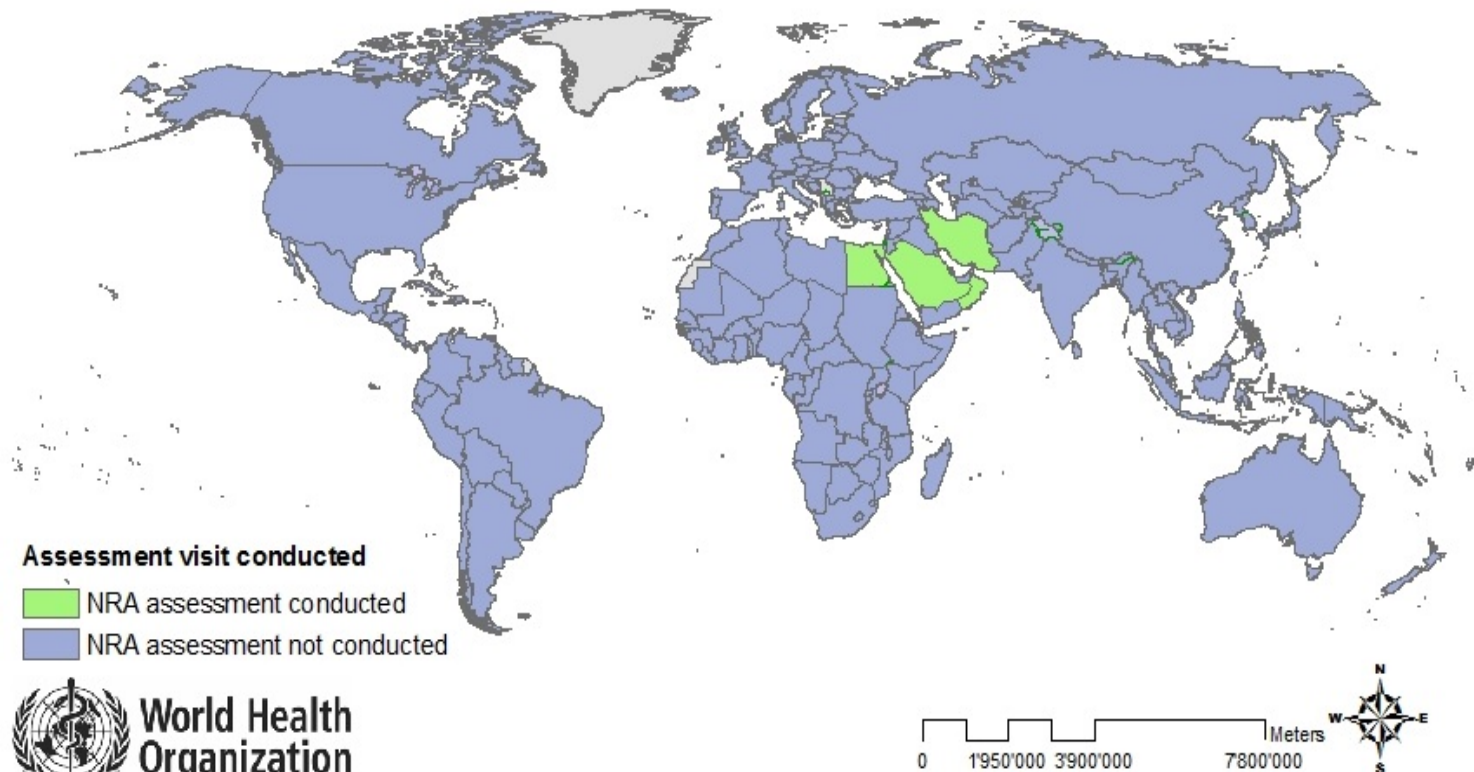
Ultimate goal to promote access to quality assured medical products – SDG 3 target...access to safe, effective, quality and affordable essential medicines and vaccines for all

## Global Benchmarking Tool

The WHO Global Benchmarking Tool (GBT) provides an objective and well tested methodology for benchmarking regulatory systems, establishing an institutional development plan (IDP) for addressing areas for improvement and for monitoring progress

GBT also allows for an assessment of the maturity of the regulatory system with the objective of bringing all regulatory authorities to a level commensurate with a stable, well-functioning system

# WHO NRA Assessment Visits: 1997



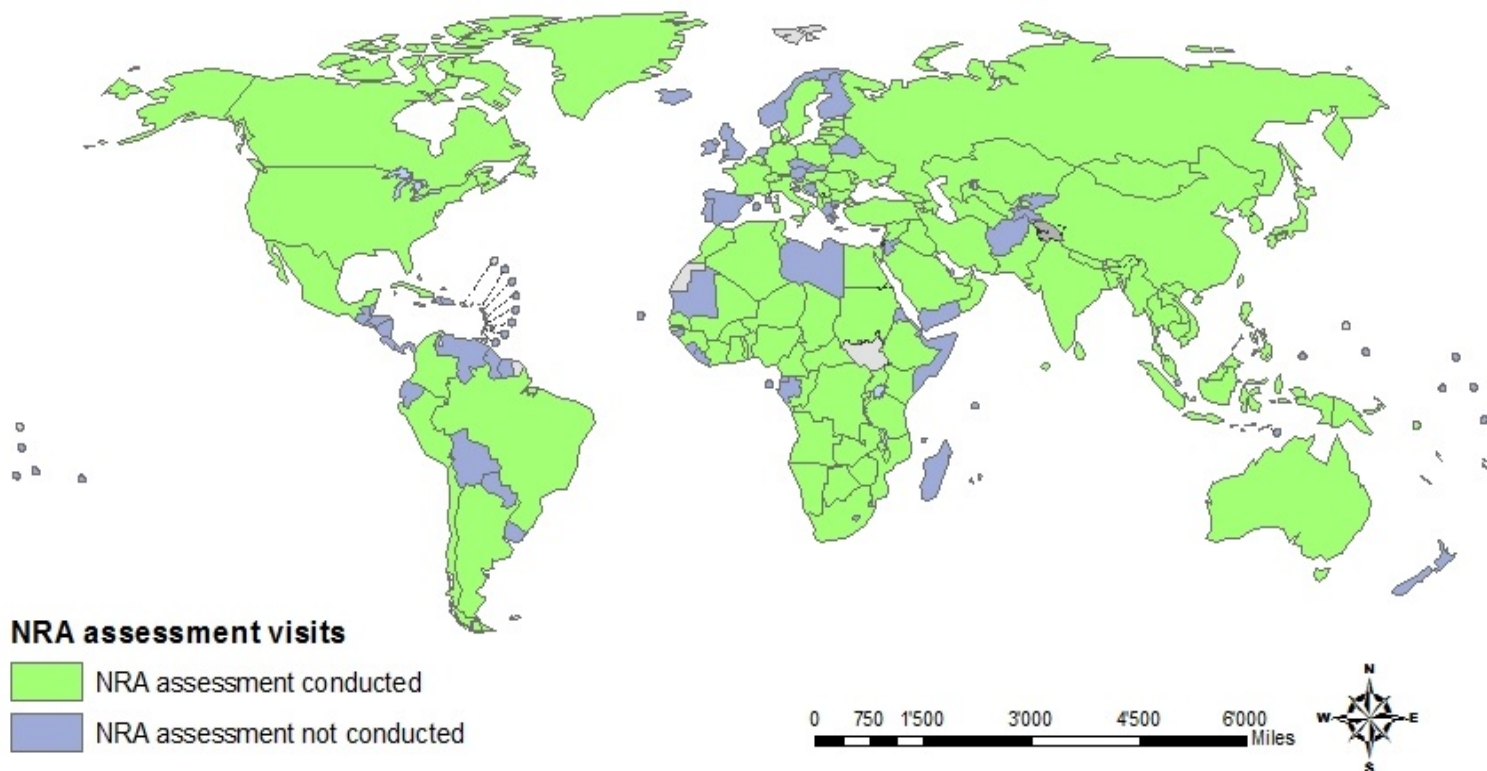
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Data Source: World Health Organization, Immunization Vaccines and Biologicals (IVB). Updated as of 2 May 2011

Map Production: Public Health Information and Geographic Information Systems (GIS) World Health Organization in collaboration with P&B Consulting

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# WHO NRA Assessment Visits: 2015



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Data Source: World Health Organization, Immunization Vaccines and Biologicals (IVB). Updated as of 5 June 2013  
Map Production: Public Health Information and Geographic Information Systems (GIS)  
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**World Health Organization**

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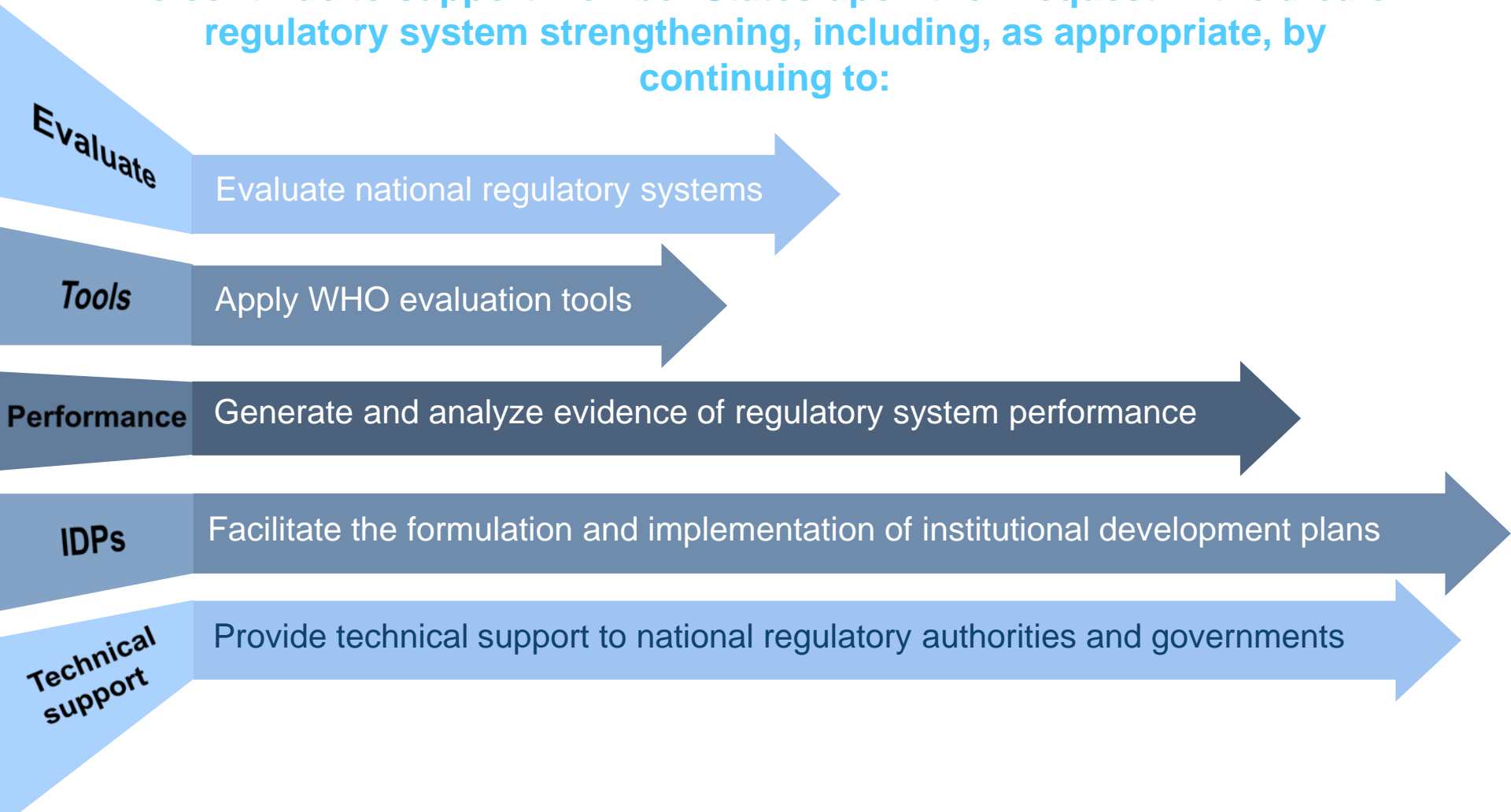


# WHA Resolution 67.20

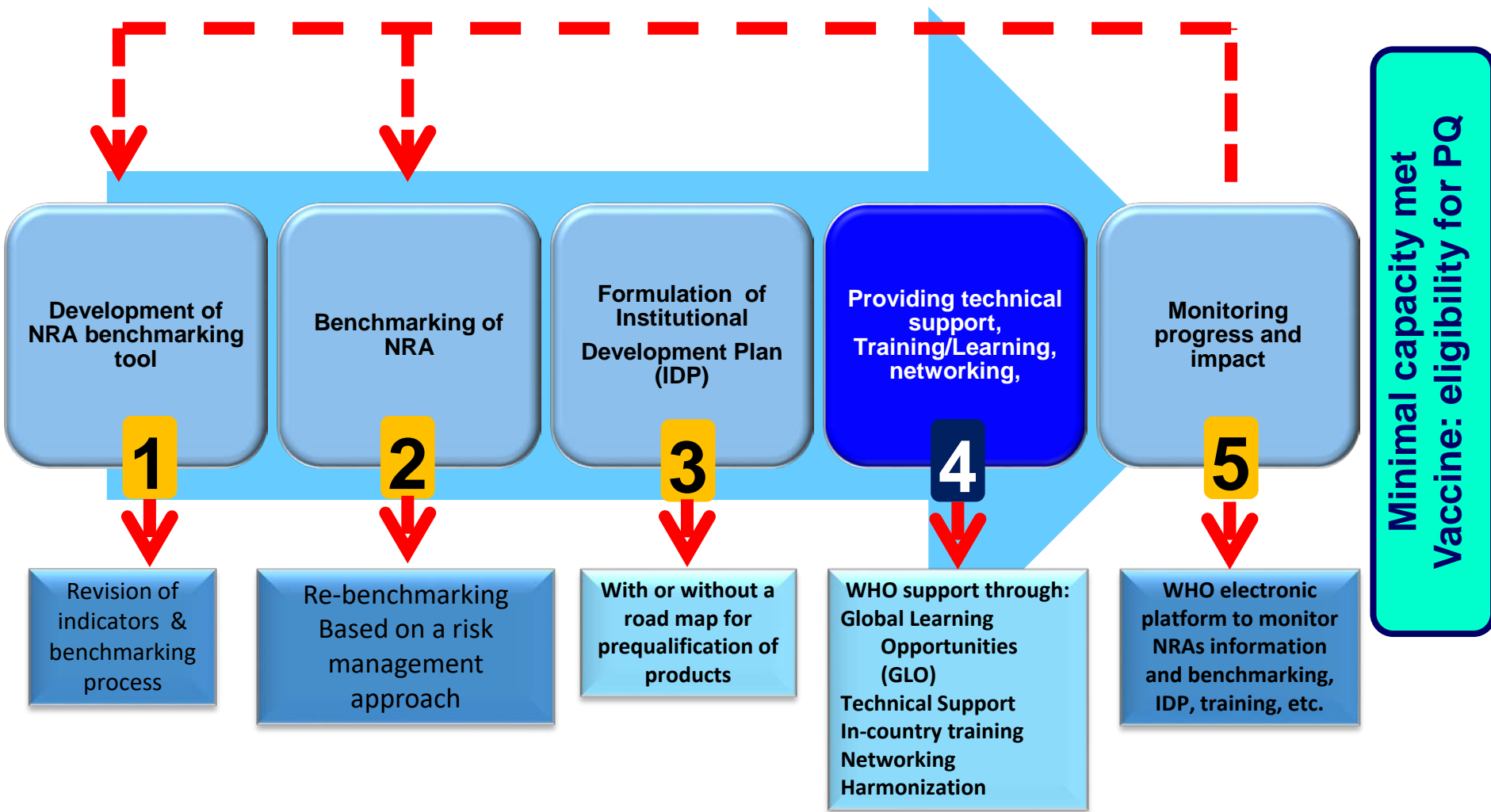
## What WHO should do



To continue to support Member States upon their request in the area of regulatory system strengthening, including, as appropriate, by continuing to:

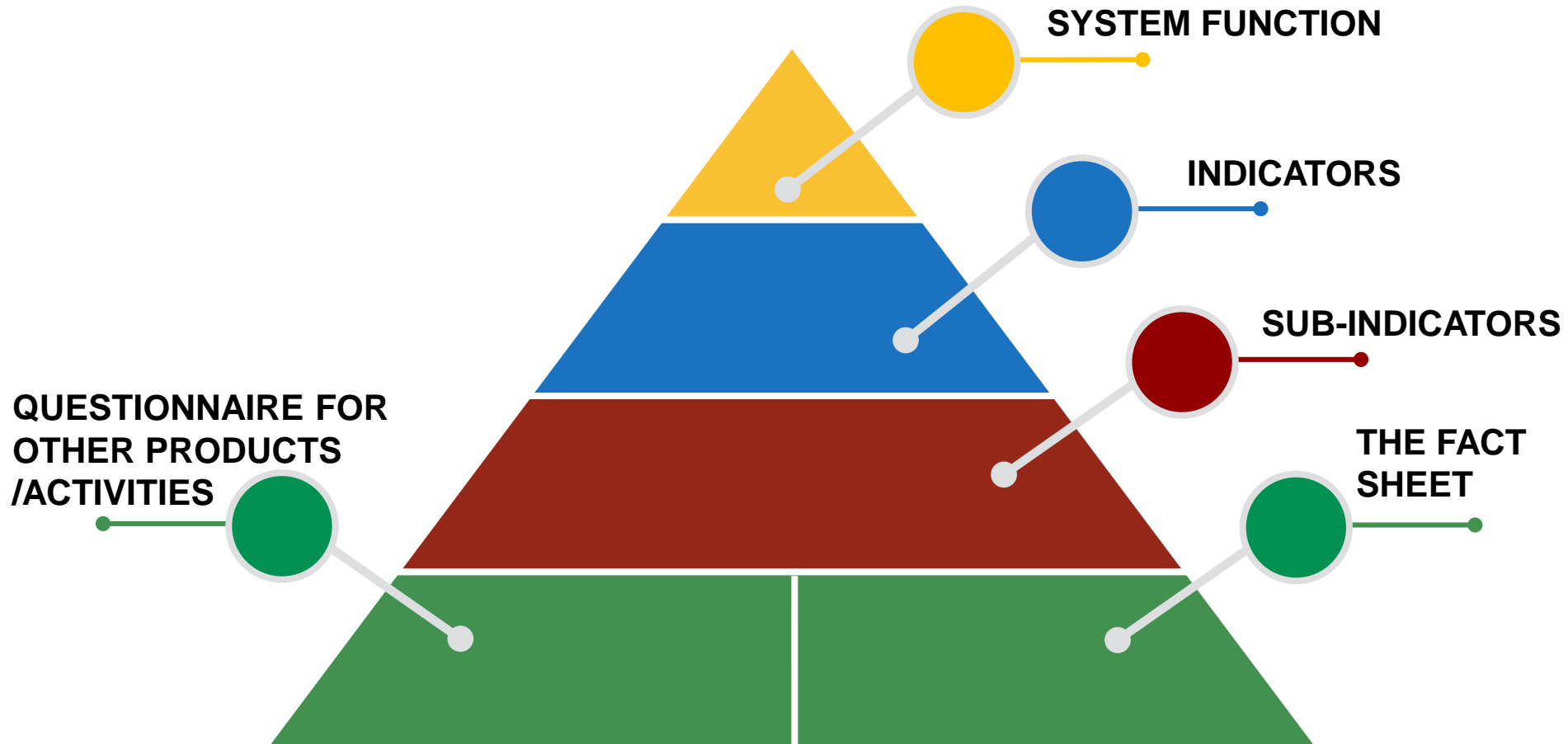


# WHO NRA 5 step capacity building



# WHO Global Benchmarking Tool

## Structure/Hierarchy





# WHO Global Benchmarking Tool

## Structure/Hierarchy

National Regulatory System (NRS) and Functions (NRF)

**SYSTEM**

**FUNCTION**

QUESTIONNAIRE FOR  
OTHER PRODUCTS  
/ACTIVITIES

1. Regulatory System
2. Common Function
3. Non Common Functions

### Common Function

01-NATIONAL REGULATORY SYSTEM  
02-REGISTRATION AND MARKETING  
AUTHORIZATION  
03-VIGILANCE  
04-MARKET SURVEILLANCE AND CONTROL  
05-LICENSING PREMISES  
06-REGULATORY INSPECTION  
07-LABORATORY ACCESS AND TESTING  
08-CLINICAL TRIAL'S OVERSIGHT

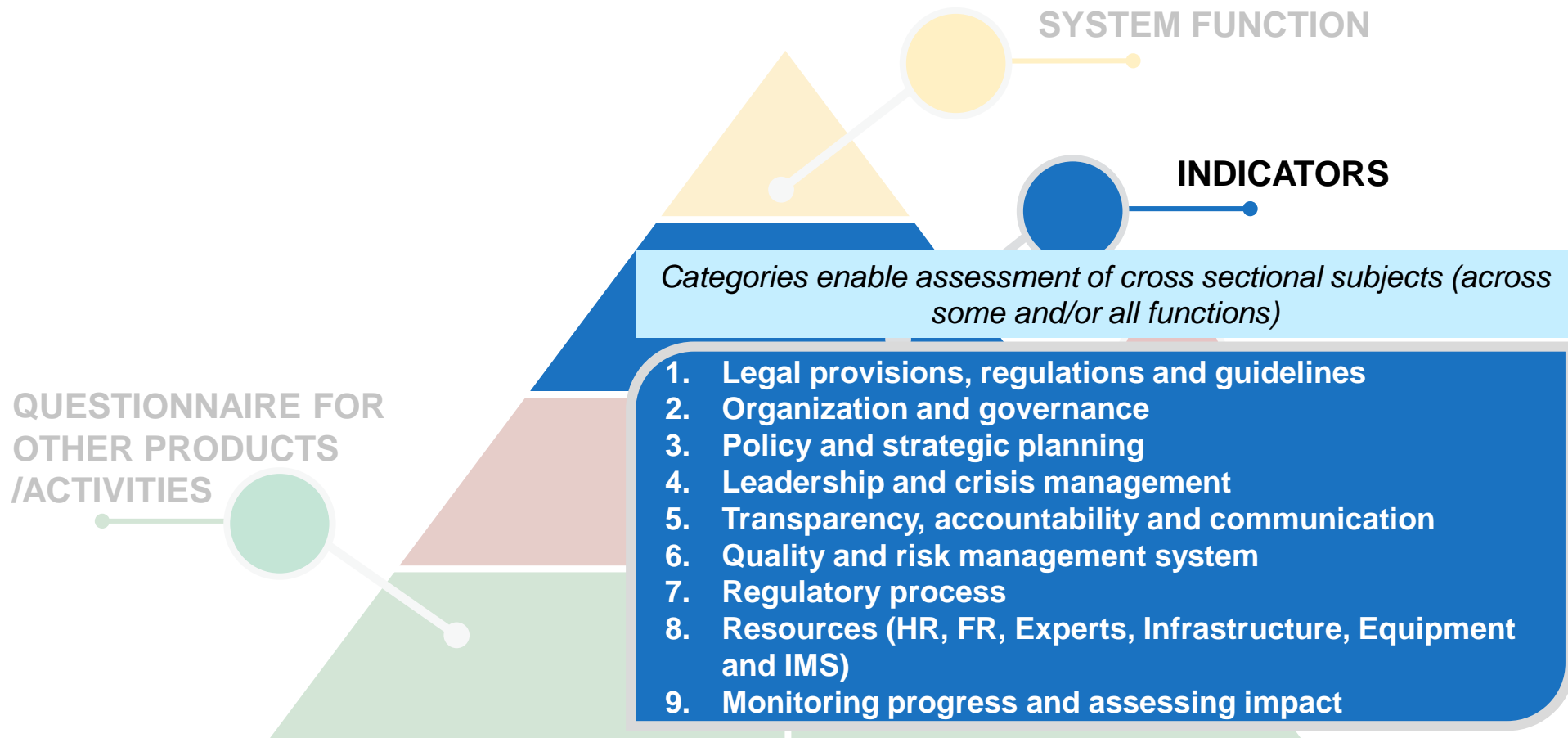
### Non Common Functions

09-NRA LOT RELEASE

# WHO Global Benchmarking Tool

## Structure/Hierarchy

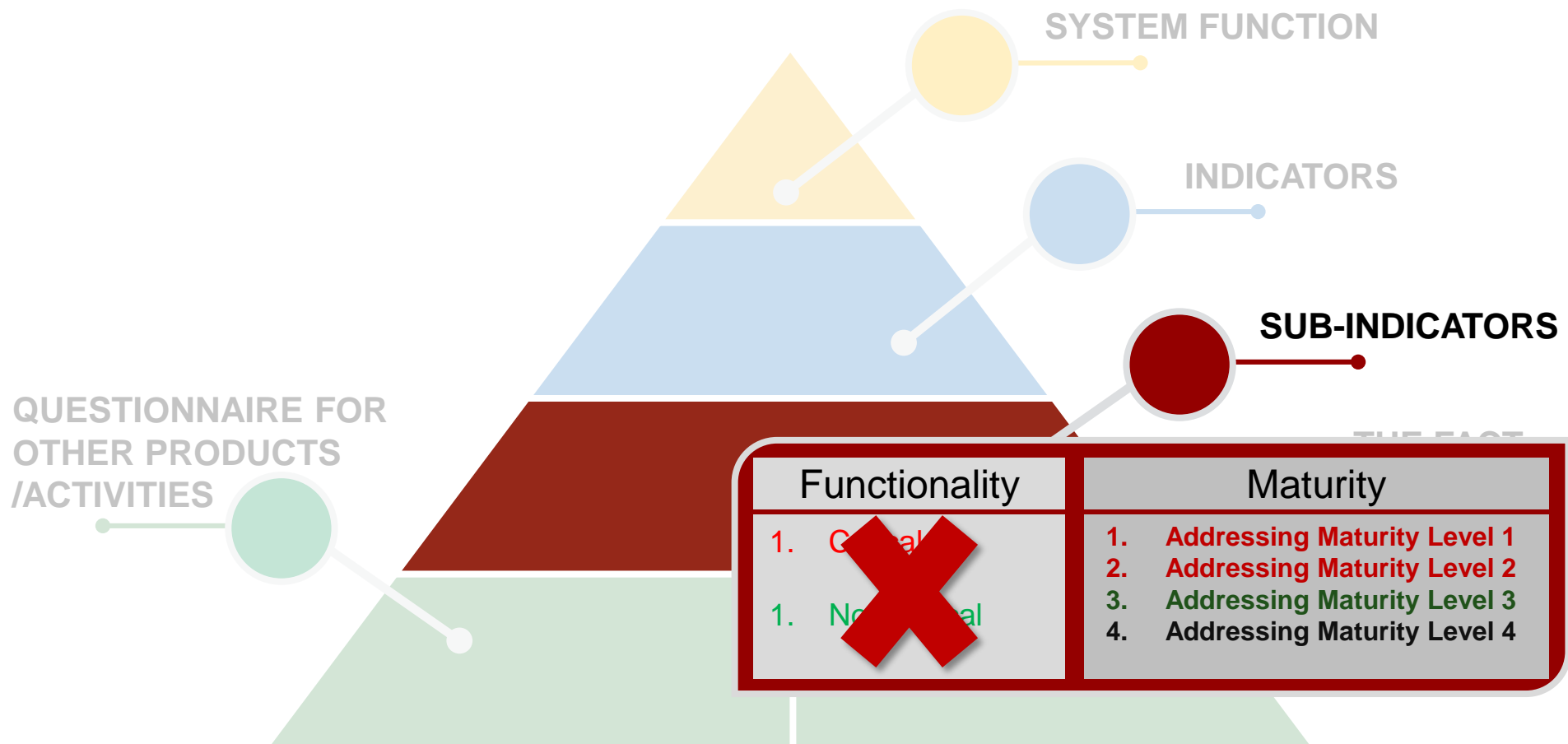
### Indicators Categorization (cross cutting subjects)



# WHO Global Benchmarking Tool

## Structure/Hierarchy

### Sub-Indicators Categorization



# WHO GBT Performance Maturity Levels

ISO 9004

1

*No formal approach*

Some elements of regulatory system exist

Can be consider as functional if rely on other regulators for some specific functions

2

*Reactive approach*

Evolving national regulatory system that partially performs essential regulatory functions

3

*Stable formal system approach*

Stable, well-functioning and integrated regulatory system

Target of WHA Resolution 67.20

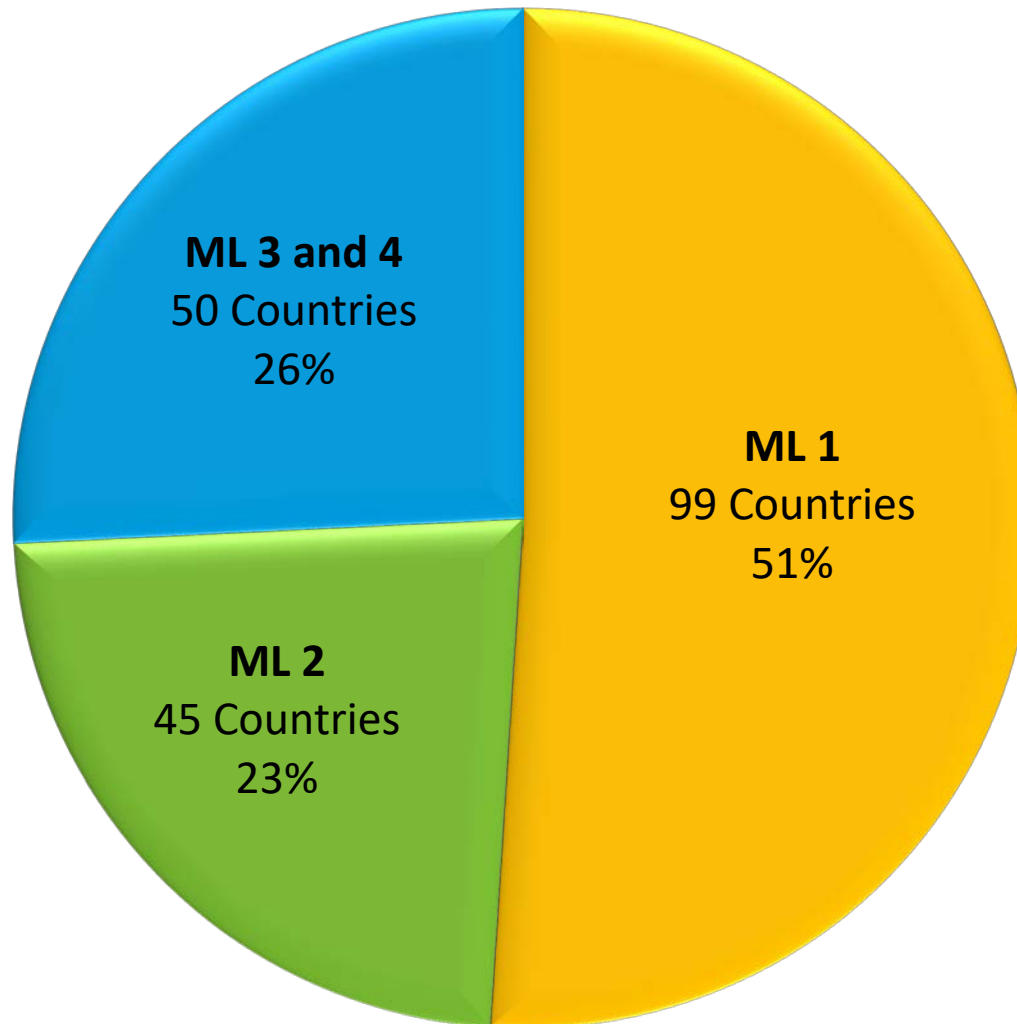
4

*Continual improvement emphasized*

Regulatory system operating at advanced level of performance and continuous improvement


Advanced/reference regulators

# Overall regulatory systems' maturity level of WHO Member States



(Updated 15 May 2018)  
WHO MVP/RSS/CRS

# Public consultation of WHO GBT Revision VI

 World Health Organization

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## WHO Global Benchmarking Tool (GBT) for evaluation of national regulatory systems







The WHO Global Benchmarking Tool (GBT) is a means by which WHO evaluates regulatory systems through a comprehensive and systematic benchmarking. The tool and benchmarking methodology:

- identifies strengths and areas for improvement;
- facilitates the formulation of an institutional development plan (IDP) to build upon strengths and address the identified gaps;
- aids in the prioritization of IDP interventions; and
- helps to monitor progress and achievements.

The development of the WHO Global Benchmarking Tool is the result of a collaborative effort between WHO headquarters and Regional Offices with support from country regulators. The tool builds on other WHO tools including the WHO Vaccine data collection tool, WHO Data Collection Tool for the Review of Drug Regulatory Systems and the WHO Regional Office for the Americas (PAHO/AMRO) assessment tools and includes features of proven benefit from these tools such as computerization, categorization of indicators/sub-indicators and inclusion of fact sheets.

New features include:

- incorporation of good regulatory practices (GRP) principles;
- adoption of the maturity level concept referenced in ISO 9004 standard;
- inclusion of a group of indicators to assess regulatory measures to prevent, detect, and respond to substandard and falsified (SF) medical products;
- integration of the regulatory relevant indicators from the WHO good governance for medicine (GGM) assessment; and
- expansion of the indicators for measurement of Quality Management Systems (QMS) of different regulatory functions.



### Related links

- ↓ [National Regulatory Systems \(RS\) fact sheet](#)  
pdf, 1.40Mb
- ↓ [Registration and Marketing Authorization \(MA\) fact sheet](#)  
pdf, 848kb
- ↓ [Vigilance \(VL\) fact sheet](#)  
pdf, 648kb
- ↓ [Market Surveillance and Control \(MC\) fact sheet](#)  
pdf, 663kb
- ↓ [Licensing Establishments \(LI\) fact sheet](#)  
pdf, 490kb
- ↓ [Regulatory Inspection \(RI\) fact sheet](#)  
pdf, 668kb
- ↓ [Laboratory Testing \(LT\) fact sheet](#)  
pdf, 637kb
- ↓ [Clinical Trials Oversight \(CT\) fact sheet](#)



## WHO Listed Authority (WLA)

Term 'Stringent Regulatory Authority', defined as original ICH member/observer, was developed to promote reliance and guide procurement decisions - widely used and recognized

Concerns with term SRA; with the fact that ICH is a harmonization initiative for pharmaceuticals, not a body with a remit or competence to assess regulatory capacity; coupled with expanding membership

WHO Expert Committee (Oct 2017) considered new WHO proposal and made a number of recommendations

## Expert Committee Recommendations

Term SRA be replaced by “WHO-Listed Authority” (WLA)

Currently identified “SRAs” will be regarded as WHO-Listed

Designation of additional NRAs be based on WHO

Global Benchmarking Tool (GBT) + completion of ‘confidence-building process’

Procedure for listing be developed through usual public consultation process

# Establishing system for recognizing and listing WLA

Concept note under development that will

- present proposed definition for WLA
- define proposed criteria and process for designating an NRA as WLA
- describe the proposed process and timelines for finalizing process for designating a WLA

Given implications, WHO intends to undertake broader consultation process

Targeting early 2019 for adoption, together with introduction of WHO GBT (version VI)

## Considerations

Voluntary process; outcome to be made public

Process must be transparent, practical, flexible and equitable

WLA will include both ML 3 and ML 4 agencies. Listing will specify

Process for renewal, including of former SRAs, will be developed taking into account existing evidence

Must ensure continued supply of quality assured products for use by UN procurement agencies/countries

WLA designation not intended to affect regional designations

Provide a robust framework to promote trust, confidence and reliance and thereby enable efficient use of regulatory resources

Encourage continuous improvement of regulatory systems

Help guide procurement decisions on medical products by UN and other agencies, as well as countries: global quality reference for international and domestic supply, including for products not eligible for PQ

Expand the pool of regulatory authorities contributing to efficiency of Prequalification programme and the efficiency of the PQ process and listing

Essentially means that marketing authorizations for WLAs would be taken into account by PQT in a manner to be defined

# WLAs

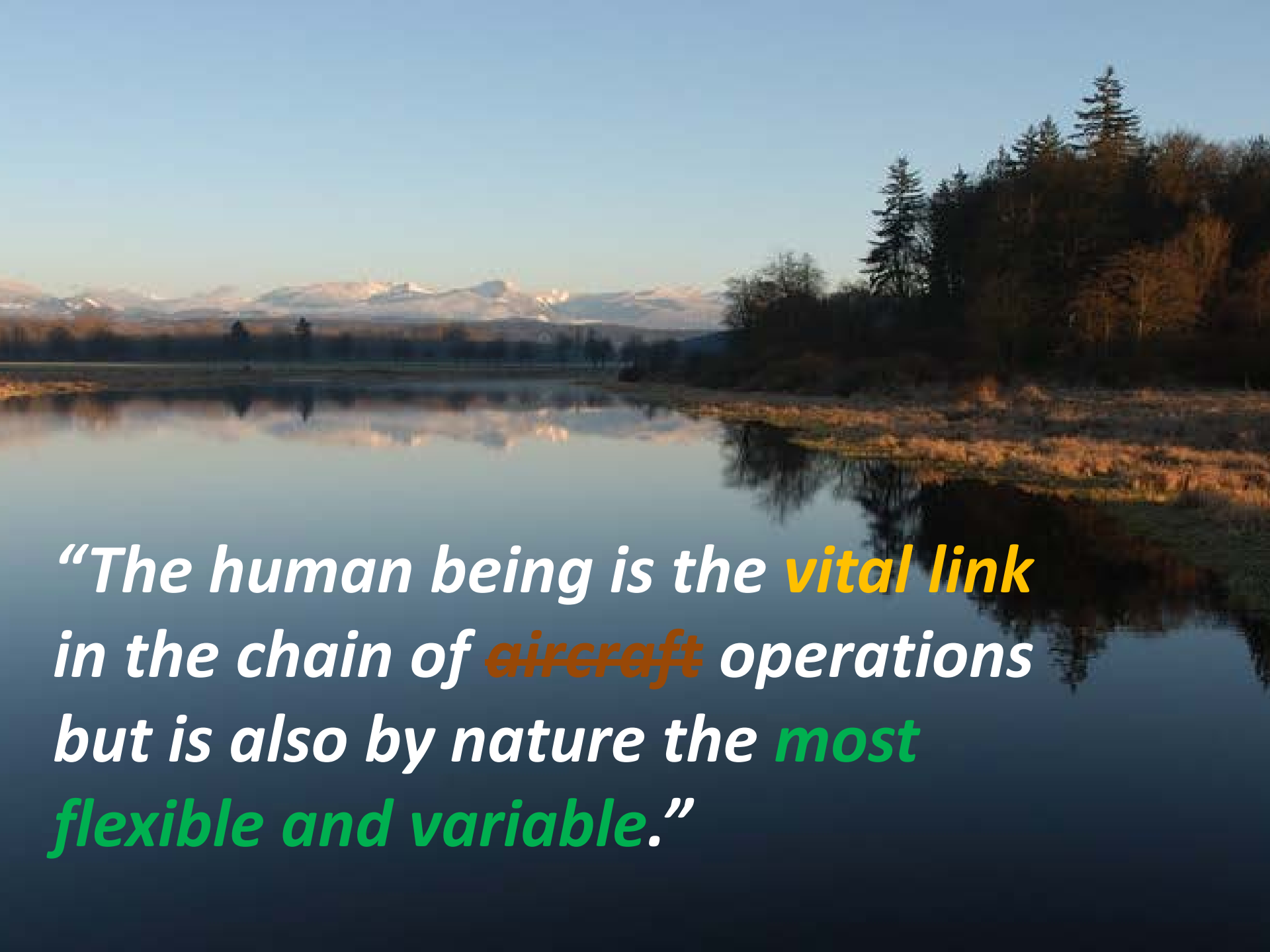
## **ML 3 authority:**

- Target of WHA resolution 67.20: well-functioning system
- Equates with former 'functional' designation
- Remains prerequisite for vaccine manufacturer application to PQ
- Status could also be taken into account for medicines

## **ML 4 authority:**

- Equates with SRA
- Could be for a specific program (generic medicines) or regulatory function (Inspection)
- Allows for abridged procedure, depending on scope of WHO evaluation





*“The human being is the **vital link** in the chain of ~~aircraft~~ operations but is also by nature the **most flexible and variable.**”*

**Human resources  
constraints and  
financial constraints  
as one of the  
challenges for  
regulatory  
systems globally**



## The need

Progress in harmonization, joint activities, and information and work-sharing,

- having an **internationally accepted set of competences** will maximize the benefits of collaboration and cooperation in medical product regulation.

WHO has established a well-recognized process for benchmarking and strengthening regulatory systems,

- the current approach in **regulatory capacity development** must include a common global competence framework if desired public health outcomes are to be achieved.

## Objective

As part of regulatory systems strengthening, the WHO is working with partners to develop a global competency framework and global curricula to **support training and professional development of regulatory staff.**

# Goal

A globally accepted competency framework that is **adaptable** is essential to **ensure standardized training approach and systematic development of competent regulatory professionals**

# Global Competency Model



Define occupational credential

Specific to the regulation of medical products

Foundation for success in the world of work

**C. Occupation-related competencies**

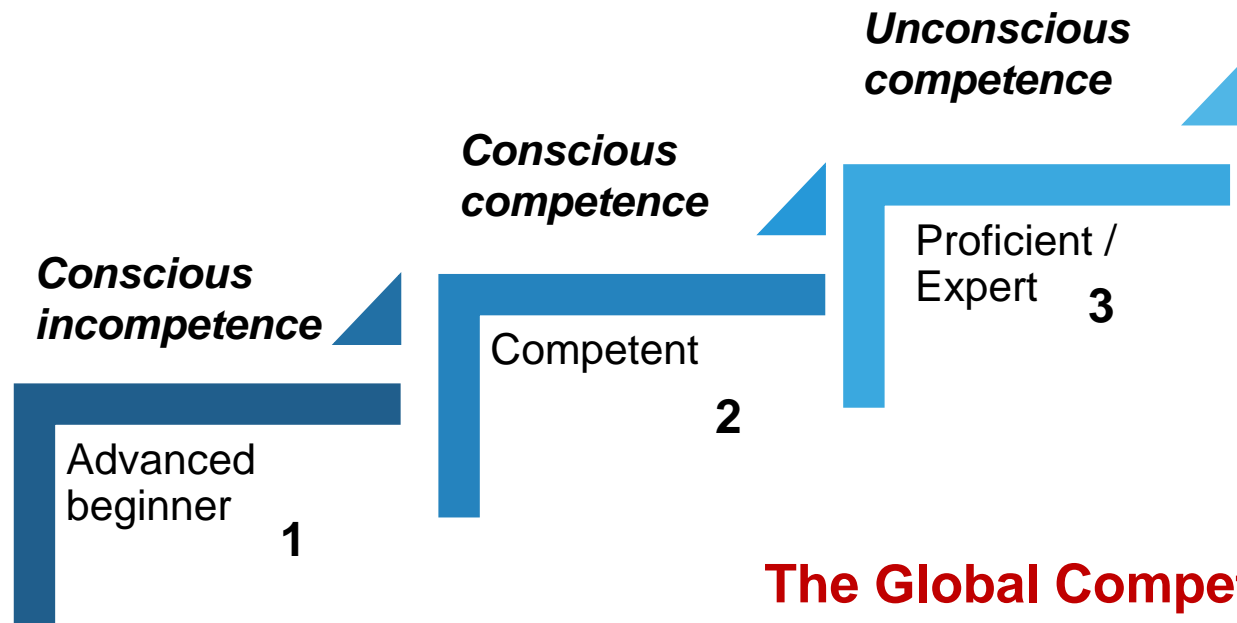
**B. Generic competencies (CORE)**

**A: Mandatory**





# Stages of Professional Development / Skill Acquisition



**The Global Competency Framework has three levels**

Five-stage model of adult skill acquisition., Dreyfus, 2004.

RAPS: uses 4 professional levels for regulatory affairs professionals

EMA: uses 3-grade level for quality assessors

[http://www.ema.europa.eu/docs/en\\_GB/document\\_library/Other/2012/11/WC500134496.pdf](http://www.ema.europa.eu/docs/en_GB/document_library/Other/2012/11/WC500134496.pdf)

# What's next in 2019...

- Public consultation
- Piloting draft competence assessment tools in 2-3 countries
- Piloting in different settings
  - NRAs of different maturity levels
  - Regional settings
  - Training institutions
- Updating based on feedback from public consultation and pilot

**Thank you for your attention**

# Back up slides

Robust assessment using relevant components of GBT  
and

Confidence building exercise or '*enhanced performance verification*' to confirm consistency in performance against international standards and best practices

## Potential Elements of Confidence Building Framework

- Sampling of assessment reports
- Observed audits
- Time limited exchange of staff
- Participation in dossier reviews
- Laboratory proficiency testing

## Attributes of a ML 4 Agency

Operates at an advanced level of performance and continuous improvement

Exercises good regulatory practices, strategic planning and effective risk-based and collaborative regulatory approaches that maximize use of available resources

Possesses necessary scientific capacity, resources, leadership and regulatory instruments to address complex and evolving regulatory issues and products