International Agency for Research on Cancer

World Health Organization

CALL FOR EXPRESSION OF INTEREST FOR EXPERTS TO SUPPORT THE EUROPEAN COMMISSION INITIATIVE ON CERVICAL CANCER (EC-CvC)

(Date: 24/10/2023)

Contents

BACKGROUND 3
The European Commission Initiative on Cervical Cancer (EC-CvC) 3
EXPERT GROUPS 3
The Working Group 3
The Working Group Chairpersons 4
Confidentiality 4
Transparency 5
Remuneration 5
Application procedure 5
Selection procedure 6
References 7
ANNEXES 8
Annex I 8
Expertise required* - European Commission Initiative on Cervical Cancer 8
Annex II 9
Guidance for completing the EC-CvC Annual Declaration of Interests (DOI) form 9

1. BACKGROUND

THE EUROPEAN COMMISSION INITIATIVE ON CERVICAL CANCER (EC-CVC)

The European Commission's (EC) Beating Cancer Plan is a comprehensive and long-term strategy to tackle cancer in the European Union (EU) and aims to improve cancer prevention, early detection, diagnosis, treatment, and survivorship.[1,2] This is coupled with the 2008 European Parliament Resolution calling on the European Commission to develop corresponding accreditation/certification programmes for cancer screening, diagnosis, and treatment based on European guidelines.[3] In response to these calls, the EC launched the European Commission Initiative on Cervical Cancer (EC-CvC) and assigned the International Agency for Research on Cancer (IARC)/World Health Organization (WHO) to execute this work, in collaboration with the European Commission's Joint Research Centre (JRC).

The key elements of the EC Initiative on Cervical Cancer are development of the **European clinical practice guidelines** and the **European quality assurance (QA) scheme**. The guidelines will cover cervical cancer prevention from HPV vaccination, cervical screening, diagnosis, and treatment of precancerous lesions. The QA scheme will cover the entire care pathway including primary to tertiary prevention. The EC Initiative on Cervical Cancer will follow a precise methodological framework for the integrated development of clinical practice guidelines with the QA scheme developed by the JRC and collaborators.[4,5] Central to this methodology is the involvement of a wide range of experts to evaluate evidence, share a range of viewpoints, build consensus, and provide input on the content of guidelines. **This open call will enable the selection of an expert pool.** A sub-set of these experts will comprise a working group who will drive the clinical practice guidelines and QA scheme development. The working group will be supported by subgroups of experts, selected from the expert pool, who will provide input on specific tasks depending on their expertise.

2. EXPERT POOL

All eligible applicants will be considered for the expert pool to support the activities of the EC Initiative on Cervical Cancer. Selected experts may be called upon to provide specific ad hoc advice, guidance, and consultation on issues or tasks of the initiative including subgroup activities. It is the responsibility of the subgroups to work with systematic review teams to evaluate the available evidence using the GRADE methodology or to help develop a quality assurance scheme for a specific guideline question. The number of experts who will participate in each subgroup will be determined by the specific question being discussed. The experts involved will be chosen based on their expertise in the relevant field for the time required to complete the task. Finally, selected experts from the expert pool may be requested to replace members of the working group who can no longer participate in the EC Initiative on Cervical Cancer.

THE WORKING GROUP

Fifteen to twenty applicants will be selected for the working group who form the decision-making body of the initiative for the duration of the project. The working group members play a crucial role in the development of guidelines and QA scheme. They will finalise recommendations and provide the final evaluation of the evidence prepared by the systematic review team and subgroups. They will ensure that guidelines are evidence-based, relevant, and of high quality. Members will be appointed in their relevant professional capacities (Annex 1) and expected to act independently and in the public interest, not representing any private, commercial, or national interests. The application process will adhere to pre-defined inclusion criteria to ensure transparency.

Conflict of interest declarations will be required, and conflicts will be assessed following IARC's standard operating procedures.

The working group will:

1. develop patient-centred, evidence-based guidelines on HPV vaccination, cervical screening, diagnosis and treatment of pre-cancerous lesions,
2. identify quality and safety indicators and performance measures for the European QA scheme for cervical cancer care services, covering all processes of care from primary to tertiary prevention,
3. assist in addressing comments collected from key stakeholders (e.g., individuals, professional organisations, hospitals etc.),
4. assist in development of tools to support the implementation of the European QA scheme,
5. promote the use of the European guidelines and QA scheme in the members' home countries and support in the dissemination of outputs (e.g., contribute to scientific papers, conference presentations, and interactions with related working groups),
6. participate in subgroup activities matching expertise, as workload permits.

THE WORKING GROUP CHAIRPERSONS

We will select two chairpersons from among applicants who have specific methodological expertise needed to support the application of the new methodological framework for integrated development of guidelines and quality assurance scheme.

The chairpersons will:

1. Provide overall leadership and guidance to the working group in developing evidence-based guidelines for HPV vaccination, cervical screening and the development of the QA scheme,
2. Facilitate meetings, ensuring active participation and collaboration among working group members,
3. Coordinate the work of the working group and advise on subgroup activities, ensuring adherence to established methodology, timelines, and objectives,
4. Oversee the quality and rigor of the guideline/ QA scheme development process,
5. Serve as the primary point of contact between the working group and IARC investigators

CONFIDENTIALITY

All experts are subject to the obligation of professional confidentiality. The experts may not divulge information, including commercially sensitive or personal data, acquired as a result of the EC- CvC work, even after they have ceased to be members. They will sign a declaration of confidentiality to this effect. Should the experts fail to respect these obligations, IARC may take appropriate measures.

TRANSPARENCY

The working group and the subgroups will carry out activities by observing principles of transparency. All relevant documents will be published by IARC and JRC on the EC- CvC website, which will be set up to match that of the previous initiatives on breast cancer (ECIBC) and colorectal cancer (ECICC). In particular, the following data will promptly be made available to the public:

1. Name of individuals appointed as working group and subgroup members and their brief CVs
2. Rules of procedure
3. The members' declarations of interests, confidentiality, and commitment

Exceptions to publication will be considered where it is deemed that disclosure of a document would undermine the protection of a public or private interest.

REMUNERATION

In case an on-site meeting is required by IARC, travel and subsistence expenses of the working group members and experts participating in activities will be reimbursed. Reimbursements will be made in accordance with the provisions in force within IARC and within the limits of the available funding regulations.

In principle, experts will not be remunerated for the intellectual services they offer. However, IARC may decide to pay experts for extraordinary activities, in terms of the amount of the work and compliance to tight deadlines, to achieve specific goals of the activities. These will be discussed with experts on an individual basis.

APPLICATION PROCEDURE

Interested persons are invited to submit their application using the appropriate online application form available on the JRC website. Candidates who are willing to be considered for the first round of applications are advised to apply by **November 15, 2023.** However, the application will remain open for candidates who may like to be considered for future rounds of evaluation. Applications must be completed in English.

Please complete the following documents:

1. On-line application form,
2. Curriculum vitae in electronic Europass format,
3. Publication list – the 10 best scientific publications in a relevant field published during the last ten years (the applicant may also additionally provide a list of 10 publications of other types, e.g., book chapters),
4. Filled in and signed IARC/WHO Declaration of Interest (DOI) form.

Applicants must disclose any circumstances that could give rise to a conflict of interest by submitting a DOI. Please refer to Annex 2 for guidance on the completion of the DOI form. Submission of a duly completed DOI form is necessary to be eligible for appointments. All DOIs will be reviewed by the project secretariat and IARCs ethics and compliance officer. Additional supporting documents may be requested at a later stage. Documents submitted by applicants must be duly completed, legible, signed (bearing a wet signature when relevant) and numbered sequentially.

SELECTION PROCEDURE

To be considered eligible, the applicants must satisfy the following criteria:

1. The **chairpersons** of the working group should have a minimum of 10 years of relevant professional experience in the field of healthcare guidelines/policy development and any experience in quality assurance will constitute an advantage,
2. Members of the **working group** should have a minimum of 10 years of relevant competence fields listed in the call (Annex 1),
3. A University degree at postgraduate level (bachelor's + 2 years), in a biomedical or technical field relevant for this call (Annex 1),
4. Knowledge of European context and policies in the given topic area (European nationality will also constitute an advantage),
5. A good knowledge of the English language, allowing professional interaction in English (including active participation in deliberations and writing reports in English).

The first round of applicants will be selected from applications received by **November 15, 2023**. Any future review of applications will be dependent on the needs of the project. Evaluations will be based on the evidence provided by the applicant.

REFERENCES

1. Europe's Beating Cancer Plan - Communication from the commission to the European Parliament and the Council. . Brussels, Belgium: European Commission; 2023. https://health.ec.europa.eu/system/files/2022-02/eu_cancer-plan_en_0.pdf. Date accessed: 28 July 2023.

2. European Parliament resolution of 10 April 2008 on combating cancer in the enlarged European Union. Brussels, Belgium: European Parliament; 2008 [Available from: https://www.europarl.europa.eu/doceo/document/TA-6-2008-0121_EN.html?redirect]. Date accessed: 31 July 2023.

3. Council Recommendation of 9 December 2022 on strengthening prevention through early detection: A new EU approach on cancer screening replacing Council Recommendation 2003/878/EC 2022/C 473/01. Brussels, Belgium: EUR-Lex - Access to European Union Law; [Available from: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32022H1213%2801%29]. Date accessed: 31 July 2023.

4. Piggott T, Langendam M, Parmelli E, Adolfsson J, Akl EA, Armstrong D, et al. Bringing two worlds closer together: a critical analysis of an integrated approach to guideline development and quality assurance schemes. BMC Health Serv Res. 2021;21(1):172.

5. Parmelli E, Langendam M, Piggott T, Adolfsson J, Akl EA, Armstrong D, et al. Guideline-based quality assurance: a conceptual framework for the definition of key elements. BMC Health Serv Res. 2021;21(1):173

ANNEXES

ANNEX I

EXPERTISE REQUIRED* - EUROPEAN COMMISSION INITIATIVE ON CERVICAL CANCER

1. Patients and/or caregivers and/or their representatives
2. Gynaecology or Gynaecologic oncology with competence in colposcopy and/or quality assurance and/or oncosurgery
3. Specialist nurse practitioners with competence in cervical screening and/or colposcopy
4. Guideline methodology
5. Quality assurance in healthcare
6. Epidemiology with expertise in modelling
7. Epidemiology/public health/preventive medicine with expertise in prevention and screening for cervical cancer
8. Medical oncology with expertise in treating cervical cancer
9. Radiation oncology with expertise in treating cervical cancer
10. Managing screening program
11. Clinical laboratory (clinical chemistry, biochemistry, laboratory medicine) science with competence in quality assurance
12. Pathology with expertise in molecular pathology, cytology, and/or histopathology
13. Palliative care and rehabilitation
14. Oncology nursing
15. Radiology specialised in pelvic imaging or staging for cervical cancer
16. Immunology/ virology
17. Managing vaccination program
18. Reproductive and sexual health

*All experts will be appointed in their personal capacities acting independently and in the public interest, not representing any private, commercial, or national interests.

ANNEX II

GUIDANCE FOR COMPLETING THE EC-CvC ANNUAL DECLARATION OF INTERESTS (DOI) FORM

The following table provides guidance to experts as to the type and extent of information that experts should disclose as they complete IARC/WHO Declaration of Interest Forms.

Type of Interest in relation to subject of meeting or work	**Examples of Information Required**
Expert's employment or that of an immediate family member	Indicate: a. name of employer b. title and function c. period of employment
Consulting work	Indicate: a. name of contracting party b. period of consultancy c. nature / subject of consultancy d. amount of income earned per consultancy
Research support	Indicate: a. source of the support b. amount of support c. whether support provided to expert personally, immediate family member or institution to which the expert is affiliated d. subject matter of research supported e. expert's role in the conduct of the research supported (*e.g. head of research team, director of programme, scientist part of a larger team*)
Investments	Indicate whether investment in any single company, or in several companies from the same field of activity, is valued at: a. the nature of the investment (e.g. stock, bonds, partial or total ownership interest etc.) b. more than US$5,000 c. provide the name of the company

Intellectual Property	Describe: a. nature and object of the IP b. whether IP is still protected c. relevant licensing arrangements relating to the IP d. whether royalties are being paid
Public Statements and Positions	Describe: a. fora in which public position taken (*e.g. court, parliamentary committee etc.)* b. year concerned c. in brief, the position held d. the capacity in which the statement was made or position taken *(e.g. Mr. Smith in his capacity as president of ABC society)* e. indicate for how long approximately the position taken has been held or defended, if applicable e. whether there is a public record of the position held
Unfair or Competitive Advantage	a. state whether information obtained as a result of participation in the advisory body or activity could provide you with an unfair competitive advantage and/or a clear actual and direct financial or pecuniary benefit. b. Explain how you would propose to mitigate this concern.