



In reply please refer to: WP/DAR/WHOCC/2017
Prière de rappeler la référence:

Dr Seong Jae Lee
Director
Division of Rehabilitation and Health
National Rehabilitation Center
58, Samgaksan-ro, Gangbuk-gu
Seoul 01022
Republic of Korea

12 JAN 2017

Dear Dr Lee,

I am pleased to inform you that the World Health Organization has designated the Division of Rehabilitation and Health, National Rehabilitation Center, as a WHO Collaborating Centre for Rehabilitation under WHO's reference number KOR-105.

As previously agreed, you will act as Head of the Centre. Should there be any change in the future, I would be grateful if you would inform WHO without delay.

... The agreed terms of reference and workplan of the Centre are attached. We wish to emphasize that institutions designated as WHO collaborating centres are expected to implement the agreed workplan in a timely manner and to the highest possible standard of quality. Any issue that may affect the implementation of the agreed workplan should be brought to the attention of the WHO responsible officer, Dr Darryl Wade Barrett, +632 528 9865, dbarrett@who.int. For information on administrative matters, please visit the WHO website <http://www.who.int/collaboratingcentres/information/en/>.

.../

... ENCL.: As stated.

cc: The Honourable Minister of Foreign Affairs, Seoul
The Honourable Minister of Health and Welfare, Sejong-Si
The Honourable Minister of Food and Drug Safety,
Chungcheongbuk-do
The Honourable Minister of Environment, Sejong-Si
The Honourable Minister of Education, Sejong-Si
The Honourable Minister of Science, ICT and Future
Planning, Gyeonggi-do
The Director-General for International Organizations,
Ministry of Foreign Affairs, Seoul

WP/DAR/WHOCC/2017

12 JAN 2017

... We wish to also emphasize that institutions designated as WHO collaborating centres must also comply with the attached *Terms and conditions for WHO collaborating centres*. We wish to draw your particular attention to the fact that the WHO name and emblem may only be used by a WHO Collaborating Centre as described in those terms and conditions.

Finally, please note that institutions designated as WHO collaborating centres must complete a short online progress report form once a year. On the anniversary of the designation date, details will be sent to the email address of the Head of the Centre specified in the designation form.

The designation as a WHO collaborating centre will be effective for a period of four years, as from the date of this letter, unless redesignation has been approved by WHO before that date. During the period of designation, either party may revoke the designation at any time by giving three months advance notice in writing.

I look forward to our successful collaboration.

Yours sincerely,


Shin Young-soo, MD, PH.D.
Regional Director

Collaborating Centres DESIGNATION FORM

The designation form consists of three parts:

Part I - Institutional Profile

Part II - Terms of Reference (TOR)

Part III - Workplan

This designation form below, together with the Terms and conditions for WHO collaborating centres will serve as the agreement between the proposed institution and WHO if the designation as WHO collaborating centre is approved by WHO. Completion and submission of the designation form, however, does not guarantee that the designation will be approved.

Folder eCC_00014920 is in stage Notification_Letter

Name of the University, Hospital, Research Institute, Academy or Ministry

National Rehabilitation Center

Name of the Division, Department, Unit, Section or Area

Division of Rehabilitation and Health

City

Seoul

CC Reference Number

KOR-105

Title

WHO Collaborating Centre for Rehabilitation

Part I - Institutional Profile

The majority of designations as WHO CC are given to a part (e.g. department, division, unit, etc) of an institution, as opposed to the institution as a whole. Example: the Department of Microbiology of the University of ABC. In those cases, when a question in the designation form refers to the "institution", please only provide information about the concerned part (e.g. the Department of Microbiology) of the institution and not about the institution as a whole (e.g. the University of ABC). Where information about the institution as a whole is being required, this will be clearly stated.

The term "WHO CC" means the (part of the) institution designated as a WHO collaborating centre while performing the agreed terms of reference and work plan with WHO (as opposed to the institution performing other activities outside the agreed terms of reference and workplan). Example: Department of Microbiology of the University of ABC, when working on activities included in this designation form and agreed with WHO.

A WHO CC is not a legal entity. The legal entity which controls and is responsible for the WHO CC is the institution or the ministry, academy, university, established research institute or hospital of which the institution forms part.

Address of the proposed institution

1.1 Street and number

58, Samgaksan-ro, Gangbuk-gu

1.2 City

Seoul

1.3 State/Region/Canton/Province

Gangbuk-gu

1.4 Postal Code

01022

1.5 Country

KOR



**World Health
Organization**

Collaborating Centres DESIGNATION FORM

1.6 WHO Region WPRO
1.7 Phone 82-2-901-1615
1.8 Fax 82-2-901-1591
1.9 Web site <http://www.nrc.go.kr>

Staff of the proposed institution

1.10 Name of the director of the institution as a whole

Dr Seong Jae Lee

Head(s) of the proposed WHO collaborating centre

Salutation	First Name	Last Name	Email Address
Dr	Seong Jae	Lee	nrcibr@korea.kr
Salutation	First Name	Last Name	Email Address

1.12 Please list the names of professional staff working at the proposed institution together with their professional qualifications (e.g. Dr John Smith MPH). Please do not include full resumes or biographies.

Lee Seong Jae, Rehabilitation of brain disorder, M.D.
Lee Bum-suk, Rehabilitation of spinal cord injury, M.D.
Kim Wan-ho, Rehabilitation of brain disorder, CBR, M.D.

Kim Dong-ah, Rehabilitation of pediatric, spinal cord injury, M.D.
Kim Eun-joo, Rehabilitation of brain disorder, M.D.
Kim Hyun-kyung, Rehabilitation of pediatric, M.D.
Han Zee a, Rehabilitation of spinal cord injury, M.D.
Kim Jung-hwan, Neurorehabilitation, M.D.
Shin Joon-ho, Rehabilitation of brain disorder, cognitive rehabilitation, M.D.
Lee Hye-Jin, Rehabilitation of spinal cord injury, M.D.
Kim Hyeri, Rehabilitation of spinal cord injury, M.D.
Bo ram Lee, Rehabilitation of brain disorder, M.D.
Hong Moonki, General internal medical treatment, M.D.
Shin Eunhye, General internal medical treatment, M.D.
Lee Jung-yeol, Auditory Rehabilitation, M.D.
Hong sojin, Ophthalmologic rehabilitation, M.D.
Yu Hee-yeong, Dental treatment, M.D.
Cho Se-yun, Pediatric dentistry, M.D.
Son Chi-hyoung, Spinal cord injury oriental medicine rehabilitation. K.M.D
Seung-hee HO, PhD, Public Health.
Won-Kyung Song, PhD, Robotics.
Seong Pil Kim, PhD, Aerospace Engineering.
Hyo-sun Kwon, PhD, Computer Education
Hogene Kim, PhD, Biomedical Engineering.
Hyun, Choi, PhD, Cognitive Psychology.
Seon-Deok Eun, PhD, Kinesiology.
Lim, Sung-min, PhD, Korean Medicine.

Sources of funding

Note: The reference to companies in this form includes trade associations and foundations closely associated with their commercial sponsors. The reference to "companies engaged in activities relating to tobacco" includes companies engaged in the manufacture, distribution and/or sale of tobacco or tobacco products and subsidiaries of such companies (including holding companies).

1.13 During the last two years, what percentage of the proposed institution's funding was core funding? Core funding refers to funding that is received by the proposed institution in a regular manner (e.g. a specific amount received annually from a secure source), as opposed to ad-hoc contributions that are received once or at irregular intervals.
over 75% regular (core) funding

1.14 Did over the last three years, does currently, or is there a prospect that, the institution as a whole will receive funds from one or more companies whose business activities are incompatible with WHO's work (e.g. companies engaged in activities relating to tobacco)?

Yes ☐ No ☒

If "Yes", please provide details (i.e. names of companies, their business activities, level of funding, for what such funding was, is being, or will be, used, together with an indication whether such funding has stopped (and if so, the year in which it stopped), or is current or prospective.

1.15 Does the proposed institution currently, or is there a prospect that the proposed institution will, receive funds from one or more companies that have, or may be perceived as having, a direct or indirect commercial interest in the activities being conducted by the proposed institution as part of its terms of reference as a WHO collaborating centre?

Yes ☐ No ☒

If "Yes", please provide details (i.e. names of companies, their business activities, level of funding, for what such funding is being, or will be, used, together with an indication whether such funding is current or prospective).

1.16 Does the proposed institution currently, or is there a prospect that the proposed institution will, perform research or other work commissioned by industry as part of its terms of reference as a WHO collaborating centre?

Yes ☐ No ☒

If "Yes", please provide details (i.e. description of the research or other work, names of companies by which the research or other work is being commissioned, the business activities of these companies, and a clarification of the amounts charged for this research or other work, i.e. whether these amounts are charged on a cost recovery basis or any other basis).

1.17 Does the proposed institution currently, or is there a prospect that the proposed institution will, receive unspecified funds from one or more companies which it is planning to use directly or indirectly for the implementation of the agreed terms of reference as a WHO collaborating centre?

Yes ☐ No ☒

If "Yes", please provide details (i.e. the names of companies, their business activities, level of funding, for what such funding is being, or will be, used and whether the institution is dependent on the support of one or more of these companies for its continued operation).

1.18 Does the proposed institution currently, or is there a prospect that the proposed institution will, receive funding from one or more companies to support the salary of specific staff or posts working on the activities conducted as part of its terms of reference as a WHO collaborating centre?



Yes ☐ No ☒

If "Yes", please provide details (i.e. names of companies, their business activities, level of funding, for which staff or what posts such funding is being, or will be, used, and the functions of such staff and/or posts).

1.19 Did over the last three years, does currently, or is there a prospect that, any staff of the institution designated to work on the activities of the WHO collaborating centre, including the proposed head(s) of the WHO collaborating centre, have any other interactions, affiliations or relations with, or any other personal, professional, financial or business interests in, one or more companies that could give rise, or be seen as giving rise, to a conflict of interest?

Such a conflict could exist:

(i) if the company has, or may be perceived as having, a direct or indirect commercial interest in all or part of the activities being conducted by the proposed institution as a WHO collaborating centre;

(ii) if the business activities of the company are incompatible with WHO's work (e.g. companies engaged in activities relating to tobacco); or if the company has (or may be seen as having) a vested interest in exerting influence on the activities of the WHO collaborating centre and/or their outcome.

Interactions, affiliations, relations with, or other personal, professional, financial or business interests include, but are not necessarily limited to, collaborative projects or initiatives, employment, consultancy, investment interests (e.g. stocks, bonds, stock options, other securities, but not mutual funds, pension funds or similar investments that are broadly diversified), commercial business interests (e.g., proprietorships, partnerships, joint ventures), patents, trademarks, or copyrights (including pending applications), proprietary know-how in a substance, technology or process.

Yes ☐ No ☒

If "Yes", please provide details (i.e. names of the companies involved, their business activities, the nature of the interactions, affiliations, relations, or other personal, professional, financial or business interests, and the value of or income generated through such the interactions, affiliations, relations or other interests, together with an indication whether the interactions, affiliations, relations, or other personal, professional, financial or business interests in question have stopped (and if so, the year in which they stopped), or whether they are current or prospective).

Institutional characteristics

1.20 What type of entity is the proposed institution?

Public

Please provide details

1.21 What type of organization is the proposed institution?

Non profit entities

Please provide details

1.22 The proposed institution is or forms part of a

Ministry

Please provide details



1.23 Please attach a current organizational chart (1 page) of the institution as a whole, including its sub-parts such as divisions, departments, sections, unit or areas (whichever structure applies), indicating the part proposed as WHO collaborating centre.

Organization.doc

1.24 Number of years the institution as a whole is in operation

more than 10 years

1.25 Number of years the proposed institution is in operation

more than 10 years

1.26 Please list major facilities and any specialized equipment available to the proposed institution (e.g. laboratories, training facilities, documentation centre), if applicable. Please do not list general office space or standard office equipment.

<Hospital>

Hospital wards

Examination clinic for outpatients

Training center(Residency program)

Clinical laboratory(blood tests, urinalysis, pulmonary function test, radiographic etc.)

Physical therapy rooms, occupational therapy rooms, speech therapy rooms, sensory integration therapy rooms, rehabilitative robotic therapy room

Daycare rehabilitation centre

Health promotion centre - Gymnasium

Resting area for People with disabilities

ADL room

Driving simulation room and facilities

Assistive technology centre : manufacturing and clinical application room

Documentation center

<Research Institute>

Research laboratory

Robotic gymnasium : various up-to date rehabilitative robotics

Motion analysis room and facility

<Administrative sector>

Meeting rooms

1.27 Does the proposed institution currently establish a smoke-free environment across its premises, which can be illustrated either through a documented institutional/departamental policy or through the existence of national/local smoke-free legislation? The smoke-free environment must apply to all indoor workplaces and public places of the institution's premises, and must entail a complete ban of smoking indoors and no areas designated for smoking.

Yes



The proposed institution agrees with the following Terms and conditions for WHO collaborating centres.

Part II - Terms of Reference (TOR)

Please include the proposed terms of reference for the future collaboration between the proposed institution and WHO, as discussed prior to completing this form. In most cases, 1-3 TOR will be sufficient to provide a high-level framework of the future collaboration. For redesignations, the current terms of reference is automatically prefilled but can be revised as appropriate.



**World Health
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Collaborating Centres DESIGNATION FORM

For detailed instructions on how to fill in this section please click on the link provided at the top of the form.

- TOR 1** To support and cooperate with WHO in providing technical support to conduct capacity development activities in expanding delivery of disability inclusive healthcare and rehabilitation services such as assistive technology and CBR with special reference to the Western Pacific Region of WHO.
- TOR 2** To share expertise and capacity in disability and functioning data sets with reference to the third objective of the Global Disability Action Plan.
- TOR 3** To work with specific countries to strengthen rehabilitation related human resource capacity, provide technical support formulating disability related public health policy.



Part III – Workplan

Activity ID 23291	<table border="0"> <tr> <td data-bbox="446 369 861 481">Activity title</td> <td data-bbox="861 369 1404 481">International Cooperation to strengthen provision and availability of assistive technology(AT) in reference to the GATE initiative.</td> </tr> <tr> <td data-bbox="446 481 861 526">Link to TOR</td> <td data-bbox="861 481 1404 526">TOR1</td> </tr> <tr> <td data-bbox="446 526 861 593">Name(s) of responsible staff at the institution</td> <td data-bbox="861 526 1404 593">Wanho Kim, Zee-A Han</td> </tr> <tr> <td data-bbox="446 593 861 683">Type of activity</td> <td data-bbox="861 593 1404 683">Coordination of activities carried out by several institutions (e.g. other WHO collaborating centres)</td> </tr> <tr> <td data-bbox="446 683 861 940">Description of the activity and how it is implemented</td> <td data-bbox="861 683 1404 940">Actively network with the international community with specific reference to countries in the WPRO region to meet the future and current needs regarding AT and AT provision. This activity will assist WHO global and regional efforts to better understand how AT can be utilized to support the implementation of the WHO Global Disability Action Plan 2014 -2021.</td> </tr> <tr> <td data-bbox="446 940 861 1500">Expected deliverables</td> <td data-bbox="861 940 1404 1500"> <ul style="list-style-type: none"> • Hosting of regional meeting on AT (likely October 2016 for regional stakeholders including member state officials and civil society) • Workshops regarding AT and its provision to support better understanding of procurement, quality, affordability and policy issues • Sharing of documents regarding AT services in Korea and evidence regarding AT to assist national and regional understanding of AT services <p>All documents will be provided in English to WHO for collaboration and review.</p> <p>Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters</p> </td> </tr> <tr> <td data-bbox="446 1500 861 1624">WHO Deliverable (Top Task)</td> <td data-bbox="861 1500 1404 1624">2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities</td> </tr> <tr> <td data-bbox="446 1624 861 1691">Name(s) of funding sources</td> <td data-bbox="861 1624 1404 1691">National Rehabilitation Center, Ministry of Health and Welfare of Korea</td> </tr> <tr> <td data-bbox="446 1691 861 1736">Activity timeframe</td> <td data-bbox="861 1691 1404 1736">2016</td> </tr> <tr> <td colspan="2" data-bbox="446 1736 1404 1825"> This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement. </td></tr> </table>	Activity title	International Cooperation to strengthen provision and availability of assistive technology(AT) in reference to the GATE initiative.	Link to TOR	TOR1	Name(s) of responsible staff at the institution	Wanho Kim, Zee-A Han	Type of activity	Coordination of activities carried out by several institutions (e.g. other WHO collaborating centres)	Description of the activity and how it is implemented	Actively network with the international community with specific reference to countries in the WPRO region to meet the future and current needs regarding AT and AT provision. This activity will assist WHO global and regional efforts to better understand how AT can be utilized to support the implementation of the WHO Global Disability Action Plan 2014 -2021.	Expected deliverables	<ul style="list-style-type: none"> • Hosting of regional meeting on AT (likely October 2016 for regional stakeholders including member state officials and civil society) • Workshops regarding AT and its provision to support better understanding of procurement, quality, affordability and policy issues • Sharing of documents regarding AT services in Korea and evidence regarding AT to assist national and regional understanding of AT services <p>All documents will be provided in English to WHO for collaboration and review.</p> <p>Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters</p>	WHO Deliverable (Top Task)	2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities	Name(s) of funding sources	National Rehabilitation Center, Ministry of Health and Welfare of Korea	Activity timeframe	2016	This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement.	
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Collaborating Centres DESIGNATION FORM

Activity ID 23295	Activity title Learning health system – International Spinal Cord Injury Survey (LHS-InSCI)
	Link to TOR TOR2
	Name(s) of responsible staff at the institution Zee-A Han, Wanho Kim
	Type of activity Collection and collation of information
	Description of the activity and how it is implemented Provide and share disability data regarding spinal cord injury persons in Korea in a common framework with the international community and guidelines set by the LHS-InSCI initiative. Participate in the translation process of the InSCI and logistics in implementing InSCI. This activity will assist in collecting condition specific internationally comparable disability data and generate evidence that may be used in policy and research capacity building programs. This is a particularly important component of the implementation of the WHO Model Disability Survey (MDS) as it is focusing on a condition-specific example. This component will look at information across 27 countries participating in the LHS-InSCI survey in 2017. Data will be internationally comparable and using this data Korea will host an international policy dialogue.
	Expected deliverables Generate evidence regarding spinal cord injury persons in Korea in comparison with the international community. Implement results through a National Stakeholder Dialogue into Korea's health policy. This process in itself will be a good model for use in creating evidence for capacity building programs regarding disability health policy.
	All documents will be provided in English to WHO for collaboration and review.
	Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters
	WHO Deliverable (Top Task) 2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities
	Name(s) of funding sources National Rehabilitation Center, Ministry of Health and Welfare of Korea
	Activity timeframe 2016-2020
	This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement.



Activity ID 23296	<table border="0"> <tr> <td data-bbox="454 336 861 392">Activity title</td> <td data-bbox="861 336 1396 392">Support the creation of internationally comparable disability data</td> </tr> <tr> <td data-bbox="454 392 861 436">Link to TOR</td> <td data-bbox="861 392 1396 436">TOR2</td> </tr> <tr> <td data-bbox="454 436 861 504">Name(s) of responsible staff at the institution</td> <td data-bbox="861 436 1396 504">Zee-A Han, Wanho Kim</td> </tr> <tr> <td data-bbox="454 504 861 548">Type of activity</td> <td data-bbox="861 504 1396 548">Collection and collation of information</td> </tr> <tr> <td data-bbox="454 548 861 1310">Description of the activity and how it is implemented</td> <td data-bbox="861 548 1396 1310"> <p>Translate the Model Disability Survey (MDS) as well as pilot test the translated version. Incorporate specific aspects of the survey into the 2020 Korean National Disability Survey. This activity will contribute to creating internationally comparable disability data and become an example for other western pacific countries. There is a chronic lack of population disability data, and WHO is promoting the use of the MDS by Member States to build the knowledge base on disability.</p> </td> </tr> <tr> <td data-bbox="454 1310 861 1534">Expected deliverables</td> <td data-bbox="861 1310 1396 1534"> <p>Internationally comparable disability data through the implementation of the MDS. Also it will create a culturally adapted Korean version of MDS. It will also provide WPRO with the results of the 2020 Korean National Disability Survey results for use and comparison in other western-pacific countries.</p> <p>All documents will be provided in English to WHO for collaboration and review.</p> <p>Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters</p> </td> </tr> <tr> <td data-bbox="454 1534 861 1624">WHO Deliverable (Top Task)</td> <td data-bbox="861 1534 1396 1624">2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities</td> </tr> <tr> <td data-bbox="454 1624 861 1691">Name(s) of funding sources</td> <td data-bbox="861 1624 1396 1691">National Rehabilitation Center, Ministry of Health and Welfare of Korea</td> </tr> <tr> <td data-bbox="454 1691 861 1702">Activity timeframe</td> <td data-bbox="861 1691 1396 1702">2016-2020</td> </tr> </table> <p>This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement.</p>	Activity title	Support the creation of internationally comparable disability data	Link to TOR	TOR2	Name(s) of responsible staff at the institution	Zee-A Han, Wanho Kim	Type of activity	Collection and collation of information	Description of the activity and how it is implemented	<p>Translate the Model Disability Survey (MDS) as well as pilot test the translated version. Incorporate specific aspects of the survey into the 2020 Korean National Disability Survey. This activity will contribute to creating internationally comparable disability data and become an example for other western pacific countries. There is a chronic lack of population disability data, and WHO is promoting the use of the MDS by Member States to build the knowledge base on disability.</p>	Expected deliverables	<p>Internationally comparable disability data through the implementation of the MDS. Also it will create a culturally adapted Korean version of MDS. It will also provide WPRO with the results of the 2020 Korean National Disability Survey results for use and comparison in other western-pacific countries.</p> <p>All documents will be provided in English to WHO for collaboration and review.</p> <p>Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters</p>	WHO Deliverable (Top Task)	2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities	Name(s) of funding sources	National Rehabilitation Center, Ministry of Health and Welfare of Korea	Activity timeframe	2016-2020
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Type of activity	Collection and collation of information																		
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Activity timeframe	2016-2020																		



Collaborating Centres DESIGNATION FORM

Activity ID 23297	Activity title International Training Program to Strengthen Human Resources in Rehabilitation
	Link to TOR TOR3
	Name(s) of responsible staff at the institution Wanho Kim, Zee-A Han
	Type of activity Training and education
	Description of the activity and how it is implemented Providing hands on support and teaching programs in clinical fields of rehabilitation to Asia-Oceanian countries, specifically Mongolia. Training programs will be for Rehabilitation physicians, occupational therapists, physical therapists, social workers and nursing. The training programs will be run in English by specifically designated NRC staff trained for international training. Areas of training may include, general PT and OT for spinal cord injury, stroke as well as specific clinical rehabilitation areas such as dysphagia, specialized seating etc.
	Expected deliverables Accreditation by the NRC after training. Approximately 10 trainees / year in various rehabilitation related professions.
	All documents will be provided in English to WHO for collaboration and review.
	Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters
	WHO Deliverable (Top Task) 2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities
	Name(s) of funding sources National Rehabilitation Center, Ministry of Health and Welfare of Korea
	Activity timeframe 2016-2020
This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement.	



Activity ID 23298	Activity title Capacity building of expanding disability inclusive health and rehabilitation service delivery
	Link to TOR TOR3
	Name(s) of responsible staff at the institution Wanho Kim, Zee-A Han
	Type of activity Product development (guidelines; manual; methodologies; etc.)
	Description of the activity and how it is implemented Provide evidence based resources regarding Korean best practices in areas of disability data formulation (Korea's National Disability Survey) and various disability legislation (Act on Welfare for PWDs, Act on Health Promotion and Health Service Delivery for PWDs, AT legislation) and implementation. Contribute to WPRO DAR activities by providing ad hoc technical support for specific activities.
	Expected deliverables Provide Korean best practice English resources as well as personnel and funding during various WPRO capacity building of expanding disability inclusive health and rehabilitation service delivery. All documents will be provided in English to WHO for collaboration and review. Clause in Paragraph 3.3 of Collaborating Centre Terms and Conditions is sufficient for intellectual property matters.
	WHO Deliverable (Top Task) 2.4.1: Implementation of the WHO global disability action plan 2014–2021: better health for all people with disability, in accordance with national priorities
	Name(s) of funding sources National Rehabilitation Center, Ministry of Health and Welfare of Korea
	Activity timeframe 2016-2020
This activity has been specifically developed for the workplan of the WHO collaborating centre and does not constitute a standard activity of the institution without WHO involvement.	

TERMS AND CONDITIONS FOR WHO COLLABORATING CENTRES

1. The general conditions of becoming a WHO collaborating centre
2. Use of the WHO name, emblem and flag
3. Intellectual property
4. Interaction of WHO collaborating centres with industry and private sector in general
5. Research
6. Guideline development
7. Other Conditions

Definitions and notes

Unless otherwise stated, for the purpose of this document,

- the term "institution" means the part (e.g. department, division, unit, etc) of the institution (e.g. university, research institute, hospital or academy) or Government that is being proposed for re/designation. Example: Department of Microbiology of the University of ABC...

- the term "WHO CC" means the institution designated as a WHO collaborating centre while performing the agreed terms of reference and work plan with WHO (as opposed to the institution performing other activities outside the agreed terms of reference and workplan). Example: Department of Microbiology of the University of ABC... when working on two activities included in their designation form and agreed with WHO.

A WHO CC is not a legal entity. The legal entity which controls and is responsible for the WHO CC is the institution or the ministry, academy, university, established research institute or hospital of which the institution forms part.]

Through the signature of this form, a duly authorized representative of the institution proposed for (re)designation as a WHO CC (hereafter referred as "the head of the proposed WHO CC"), hereby accepts and agrees on behalf of the institution to comply with the following terms and conditions, in the event the proposal for re/designation is approved by WHO:

1. GENERAL CONDITIONS

Upon designation, the designated institution will be responsible for:

- a) implementing the agreed plan of work in a timely manner and to the highest possible standards of quality;
- b) bringing to the attention of the WHO responsible officer any issue that can delay or compromise the implementation of the workplan, and/or any change in the information provided in this form;

c) submitting annual progress reports via eCC on the anniversary of the designation date and as may be requested by WHO;

d) initiating discussions with the responsible officer at WHO at least six months prior to the expiration of the period of designation, with a view to evaluating any possible re-designation of the WHO CC.

2. USE OF WHO NAME, EMBLEM AND FLAG

As a general rule, a WHO CC may obtain permission to use WHO's name and emblem¹ only in relation to an activity included in the agreed work plan (as opposed to other activities that the institution may conduct outside the workplan). Use of the WHO name and/or emblem requires the prior approval of the WHO Director General on a case by case basis. Any authorization for use of the WHO name and emblem is granted only for the purpose for which such authorization has been requested and automatically comes to an end upon completion of the said purpose or expiration of the period of designation of the WHO CC, whichever occurs first.

To obtain permission to use WHO's name and/or emblem in relation to an activity from the work plan, the WHO CC should contact their responsible officer at WHO with a justification and a *mock-up of the proposed use* in line with the conditions set forth below.

General considerations

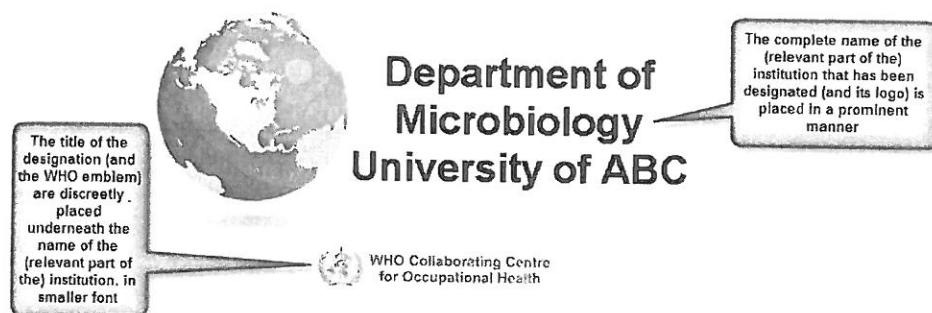
- a) the WHO emblem and/or name should never be used in isolation. Instead, the exact title of the WHO CC (hereafter referred to as the "title"), as indicated in the official letter of designation and registered in the WHO CC global database (e.g. "WHO Collaborating Centre for Occupational Health") should be used, rather than the WHO name alone. If the WHO emblem is also to be used, it may only be placed directly next to the title;
- b) The title (and emblem) should be discreetly used (and both have a similar size), and placed immediately underneath the name of the (relevant part of the) designated institution, which should have a more prominent position;
- c) The characters of the title must be smaller than the characters of the name of the designated institution (or relevant part thereof), e.g. "WHO Collaborating Centre for Occupational Health" must be typed in smaller characters than "School of Occupational Health, ABC University".
- d) All words in the title must be of the same font size, e.g. "WHO" may not be larger than "Collaborating Centre for Occupational Health".

¹ Emblem and logo are different things. The WHO logo incorporates the WHO emblem and the name of the Organization in a single design. Normally, WHO CCs are not allowed to use the WHO logo. Instead, they may be authorized to use the WHO emblem and title of their designation as a WHO CC following the rules stated in this document.

- e) If, in addition to the title, the WHO emblem is to be used, the emblem of the designated institution should also be used, and the former should be of smaller size than the latter.



Example



Example

- f) If the language used by the WHO CC is not one of the official languages of the World Health Organization (Arabic, Chinese, English, French, Russian and Spanish), or in case of designation by a WHO Regional Office, one of the official languages used by that regional office, then the WHO CC must also use one of those official languages .

2. 1 Use of the WHO name and emblem on letterheads

Subject to the general rule and considerations stated above, a WHO CC may use its official title and the WHO emblem on letterheads for correspondence related to the agreed activities.

2. 2 Use of the WHO name and emblem on a dedicated webpage

Subject to the general rule and considerations stated above, and the additional conditions stated below, a WHO CC may use its official title and the WHO emblem on a dedicated WHO CC Webpage.

Before submitting the request for permission, the responsible officer at WHO should receive a draft web page from the WHO CC to ensure that:

- a) the WHO emblem is not used on the main web page of the designated institution (or part thereof). Instead, a discreet reference to the designation of the institution as a WHO CC may be included in the webpage of the institution, and that

reference could be linked to a separate page fully dedicated to the activities of the institution as a WHO CC;

- b) the proposed web page is in accordance with the terms of reference and workplan of the WHO CC, i.e. it only refers to the activities of the institution in its capacity as a WHO CC as described in the terms of reference and workplan;
- c) the content of the proposed web page is acceptable to WHO from a technical and scientific point of view;
- d) if any financial support from the private sector is to be received for the development of the Webpage, this has to be consistent with the rules on interaction of WHO collaborating centres with the commercial private sector including in respect of the manner in which contributors are acknowledged.



Example above: main page of the Department of Microbiology of the University ABC.

Example below: page within the web site of the Department of Microbiology of the University ABC, especially dedicated to the activities in its capacity as a WHO CC for Diphtheria and Streptococcal Infections.



2. 3 Use of the WHO name and emblem on brochures, presentations and published material

Such use is subject to the general rule and considerations stated above and to a case by case approval by WHO.

2. 4 Flag

A WHO CC may submit a request for time limited use of a WHO flag at specific occasions (e.g. World Health Day). Such a request should be submitted to the WHO responsible officer. Approval, if granted, will be subject to the WHO CC displaying the flag in conformity with the WHO Flag Code and Regulations (sent along with the flag). At the end of the specific occasion for which approval has been granted, the flag must immediately be returned to the Organization.

2. 5 Business or visiting cards

The use of WHO's name or emblem on business or visiting cards of the staff members of the WHO CC is not allowed in any circumstance.

2. 6 Plaques

WHO does not normally authorize the use of plaques bearing its name and emblem by WHO CCs.

2. 7 Training diplomas and certificates

The WHO name and emblem may not be used on certificates of attendance, diplomas or similar awards to participants in training or other courses organized as part of a WHO CC's workplan.

3. INTELLECTUAL PROPERTY

This applies to the deliverables (outcomes) of the activities included in the workplan.

Summary table	Product of the WHO CC, and therefore WHO CC owns IP and gives licence to WHO	WHO product, and therefore WHO owns IP and gives WHO CC a licence
Copyrights (publications)	3.1.1	3.1.2
Patents (other type of deliverables)	3.2.1	3.2.2

3.1 Copyrights

3.1.1 As a rule, a product produced by the WHO CC as part of the agreed workplan and published under the institution's own name is the sole responsibility of the institution, and copyright will be vested in the institution, unless otherwise agreed. WHO is automatically granted a perpetual and irrevocable, non-exclusive, world-wide, royalty-free, sub-licensable right to use, change, adapt, translate, publish and

disseminate such work product in any manner and in any format in conjunction with the work of WHO. Any adaptation, translation, publication (including in scientific journals) and dissemination to be made by either party will be coordinated between them in order to avoid overlap. The institution will not publish in the name of WHO, nor use its title as a WHO CC and/or the WHO emblem in the product (book, article in a journal, etc), unless this has been specifically agreed with WHO, in which case the work product is subject to a special WHO's publication clearance procedures. In no case shall the name of WHO (either as an acronym or in full text) be used in the title of these products. If granted, the permission to publish in the name of WHO and/or use the title as a WHO CC and/or the WHO emblem ceases automatically upon termination or expiry of the institution's designation as a WHO CC.

3.1.2 However, if a work product is to be developed by the WHO CC as a WHO product as part of the agreed workplan, then the copyright of such work product will automatically be vested in WHO, unless WHO requests otherwise. The institution (as a WHO CC) will be appropriately acknowledged for its contribution in connection with the product. WHO retains the right to amend the work product after consultation with the institution, to decide if and how the work product will be used and whether or not it will be published and disseminated. At the institution's request, WHO will give good faith consideration to granting the institution a non-exclusive, world-wide, royalty-free right to use, translate, adapt, publish and disseminate such work product as part of its agreed workplan as a WHO CC, or to use it for the development of other work products as foreseen in the WHO CC terms of reference. Any adaptation, translation and publication (including in scientific journals) and dissemination will be coordinated with and requires the agreement of WHO in order to avoid overlap. Any licence granted by WHO will terminate automatically upon termination or expiry of the institution's designation as a WHO CC.

3.2 Patents

3.2.1. Unless otherwise agreed by the parties in writing, the ownership of any inventions, know-how, data and information and other results arising from any other study or trial carried out by the WHO CC, if exceptionally agreed as part of the workplan (see section 5 below) shall be vested in the institution, in accordance with and subject to the terms set forth below (unless otherwise agreed):

3.2.1(a) The results of the project may be freely used or disclosed by either party provided that, without the consent of the other party, no use may be made for commercial purposes and confidentiality shall be maintained with respect to results that may be eligible for protection by proprietary rights. The institution will provide WHO with the results, in the form of relevant know-how and other information, and to the extent feasible, tangible products.

3.2.1(b) The industrial or commercial exploitation of any intellectual property rights, including the ownership of know-how, arising from the project shall be designed to achieve, in so far as circumstances permit, the following objectives in the following order of priority:

- a. the general availability of the products of creative activity;
- b. the availability of those products to the public health sector on preferential terms, particularly in developing countries;

c. the grant to each party of additional benefits, including royalties, account being taken of the relative value of each party's financial, intellectual and other contributions to the research.

3.2.1(c) The rights referred to above shall belong to the institution, or to the principal investigator if the institution and WHO so agree. To the extent that the former do not intend to exercise them, the rights shall be promptly transferred to WHO, if it so requests. Each party shall provide the other with its full cooperation to permit the effective exercise of the rights. The party in which the corresponding rights are vested may file applications for industrial property protection, promptly furnishing copies of the applications and other patent documents to the other party. All rights other than the right to file applications shall be exercised in accordance with an agreement which shall be negotiated in good faith between the institution and WHO.

3.2.1(d) In any publication by the institution or the principal investigator relating to the results of the project, the responsibility for the direction of the work shall not be ascribed to WHO. Unless WHO advises otherwise, all publications shall include a notice indicating that the underlying investigation was carried out by the Institution as a WHO CC. Two off-prints or copies shall be sent to WHO unless another number is stipulated.

3.2.2 However, the ownership of any inventions, know-how, data and information and other results arising from any study or trial carried out by the WHO CC as part of the agreed workplan, as a WHO study or trial, shall be vested in WHO and shall be held by the institution in confidence and not be used by it in any way without the prior written agreement of WHO.

3.3 Generic clause

In the absence of any different provision included in the designation form, any deliverable of any activity included in the designation form subject to copyrights will be ruled by paragraph 3.1.1, and any deliverable of any activity included in the designation form subject to patent rights will be ruled by paragraph 3.2.1.

4. INTERACTION OF WHO COLLABORATING CENTRES WITH THE COMMERCIAL AND PRIVATE SECTOR

Designation of an institution as a WHO CC is independent from any kind of financial support from WHO. In most cases, the WHO CC will be expected to cover the costs of the agreed activities through the core budget of the institution and if necessary, by mobilizing additional extra-budgetary resources. This does not prevent WHO from contributing financially in some cases, provided that funds are available and obligated for that purpose.

In order to safeguard the credibility, independence and objectivity of the work conducted by an institution as a WHO CC, WHO seeks to ensure that the interactions which this institution may have with the commercial private sector does not give rise to any real or perceived conflicts of interest in respect of the work of the WHO CC.

The commercial private sector includes:

- a) companies;
- b) associations representing companies or certain business interests ("trade associations"); and
- c) foundations not at arms' length of their commercial sponsors.

For the purpose of this document, companies, associations representing companies or certain business interests ("trade associations"), and foundations not at arms' length of their commercial sponsors are jointly referred to as "companies".

Below are examples of the types of interaction that may give rise to a real or perceived conflict of interest in respect of the work of the WHO CC. Before the (re)designation of an institution as a WHO CC, the institution must:

- ascertain whether it and/or the responsible WHO CC staff are engaged in any interactions with the commercial private sector (particularly in respect of any activities that fall within the WHO CC's terms of reference and/or work plan); and
- if so, provide details thereof to WHO (including in particular, details about the identity of the companies in question, their business interests, and the activities, research and/or staff at the WHO CC which are concerned by the interaction).

Should WHO consider that an interaction gives rise to the risk of a real or perceived conflict of interest, every effort should be made to reach a mutually acceptable solution, consistent with the guidance provided in this section. In the event no such solution can be found, WHO will not be able to proceed with the proposed (re)designation of the institution as a WHO CC.

4. 1 Funding or other support from companies with incompatible business activities

The institution should not accept funding or other support (e.g. in kind or through secondment of employees) from companies whose business activities are incompatible with WHO's work (such as, for example, tobacco companies). This applies to both the activities of the institution as a WHO CC and any other activities of the institution as a whole.

4. 2 Funding or other support from companies with a direct commercial interest

The WHO CC should not accept funding or other support (e.g. in kind) from a company, if the company in question has, or may be perceived as having, a direct commercial interest in the outcome of that activity. For example, funds or other support should not be accepted from a manufacturer of insulin for an activity which (even generically) relates to the treatment of diabetes.

4. 3 Funding or other support from companies with indirect commercial interest

A WHO CC should exercise caution in accepting financing or other support from a company that has even an indirect interest in the outcome of an activity (e.g. in the case of an activity relating to the epidemiology of a disease, caution should be exercised in accepting funds or other support from a manufacturer of drugs for the

disease). In such cases, it is preferable to secure funding from multiple competing sources (i.e. so as to avoid a perceived close association with one particular company). In addition, the larger the proportion of the donation from any one source, the greater care that should be taken to avoid the possibility of a conflict of interest or appearance of an inappropriate association with one contributor.

4.4 Unspecified support

In the event of an unspecified donation from a company, or group of companies, for the activities of a WHO CC in general (and not designated for a specific activity), the institution should ensure that the following is complied with:

- a) The donation should not be used to support activities in which the company, or group of companies, has a direct commercial interest (see paragraph 4.2. above). In the event it is intended to use the donation to support activities in which the company, or group of companies, has an indirect commercial interest, donations should be sought from various sources having a similar interest; and it is preferable that support from multiple competing sources is secured (see paragraph 4.3 above). The larger the proportion of the donation from any one source, the greater the care that should be taken to avoid the possibility of a conflict of interest or appearance of an inappropriate association with one contributor.
- b) The overall amount of unspecified support provided by the company, or group of companies, should not be so large that the WHO CC would become dependent on support from a single company, or group of companies, for its continued operations.

4.5 Support for activities related to the production of WHO guidelines or recommendations

As a general rule, a WHO CC should not accept any funds or other support from companies (regardless of their business interests) for activities related to the production of WHO guidelines or recommendations. The reason for this is that WHO's normative and standard setting work should be free from commercial concerns.

4.6 Funding to support the salary of specific staff or posts and secondment of company employees

Further, a WHO CC should not accept funds from companies to support the salary of specific staff or posts designated to the activities of the WHO CC (including short-term consultants), if the financial support could give rise to a real or perceived conflict of interest. For example, a conflict of interest would arise if the responsibilities of the staff member or post are directly or indirectly related to the business interests of the commercial contributor.

Similarly, a WHO CC should not accept the secondment of company employees to work on the activities of the WHO CC, if the company has a direct or indirect commercial interest in all or part of those activities.

4.7 Commissioned research or other work

The activities which an institution conducts as a WHO CC (as part of the WHO CC's terms of reference and/or work plan) should not include any research or other work commissioned by industry. In other words, WHO CCs should not, as such, perform research or other work which is contracted by companies.

4.8 Declaration of the interests of the director and other responsible staff

The institution should ensure and attest to WHO that the director and staff designated to work on the activities of the WHO CC do not have any interactions, affiliations or relations with and/or financial or other interests in companies (as defined above) that could give rise to, or be seen as giving rise to, a conflict of interest in respect of any of these activities.

In the event the WHO CC director and/or staff have any interactions, affiliations, relations and/or financial or other interests that could give rise to a real or perceived conflict in respect of any of the activities of the WHO CC, the institution should take appropriate measures to address and remove such conflicts. Examples of the type of interactions, affiliations, relations and financial or other interests that could give rise to, or be seen as giving rise to, a conflict of interest, can be found in the Declaration of Interest (DOI) for WHO experts, which can be found at http://www.who.int/collaboratingcentres/Declaration_of_Interests.pdf. The WHO DOI is not, however, intended for use by the institution. The institution should make its own arrangements to ascertain, address and remove any possible conflicts which the WHO CC director and/or staff may have.

4.9 Information to be provided to WHO

In light of the above, before an institution can be (re)designated as a WHO CC, the head of the proposed WHO CC must ascertain whether:

- a) the institution receives funding or other support from companies whose business activities are incompatible with WHO's work (such as, for example, tobacco companies);
- b) the institution, as part of the work plan of the WHO CC, will conduct:
 - activities that are funded or otherwise supported by companies (or trade associations or foundations closely associated with their commercial sponsors); and/or
 - research or other work commissioned by industry; and/or
- c) the institution receives funding to support the salary of specific staff or posts at, and/or the secondment of company employees for, the WHO CC.

In the affirmative, the institution should provide details (in the relevant sections of the re/designation form) about the identity of the contributors in question, their business interests, and the activities, research, staff and/or posts concerned, as well as any other information and/or clarification which WHO may reasonably require.

In addition, the head of the proposed WHO CC must ascertain whether the director and/or staff designated to work on the activities of the WHO CC have any interactions, affiliations or relations with and/or financial or other interests in companies which could give rise to a real or perceived conflict in respect of any of the activities of the WHO CC. In the affirmative, the institution must take appropriate measures to address and remove such conflicts.

The institution is required to attest to WHO that:

- the director and staff designated to work on the activities of the WHO CC have been required to declare any such interactions, affiliations, relations and financial or other interests; and that
- either no conflicts exist, or appropriate measures have been taken to address and remove them.

4.10 Evaluation by WHO and agreement on possible measures to be taken

The institution must make every effort to provide all relevant and potentially relevant information to WHO for evaluation, and where needed, to arrive at a mutually acceptable solution, consistent with the guidance provided in this section. For example, activities that give rise to a conflict of interest as described above or that have been commissioned by industry, will need to be deleted from the work plan, in order for a (re)designation to be approved. Similarly, WHO CC staff who have declared an interaction, affiliation, relation and/or financial or other interest in a company or group of companies that gives rise to a real or perceived conflict in respect of any activity of the WHO CC will need to recused from working on that activity.

With respect to those contributions from companies which are deemed acceptable, the WHO CC should -for reasons of transparency- always make a public acknowledgement. The basic and most common approach is to insert a discreet acknowledgement in the documentation relating to the activity concerned, including in any publication by the WHO CC of the outcome of this activity.

WHO may also require WHO CCs to publicly disclose the interactions, affiliations, relations and/or other interests of its director and/or staff that are considered to give rise to a conflict of interest.

Before accepting any contributions from companies, WHO CCs should seek the written assurance from the contributors in question that they will not use the results of the work that they have supported for commercial purposes or seek promotion of the fact that they have made a donation. However, they may make reference to donations in their corporate annual reports or similar internal documents.

WHO CCs should at all times maintain full and exclusive control over the activity to which a contribution relates, including over any report of the activity, its contents, whether it is published or disseminated in any form (e.g. electronically), and the timing of such diffusion.

5. RESEARCH CONDUCTED BY WHO CCS UNDER A JOINT WORK-PLAN

The terms of reference or work plan of a WHO CC should not include research involving human participants conducted by the WHO CC on its own accord. Instead, the terms of reference or work plan could provide that the centre will "participate in collaborative research under WHO leadership". Such activities will be conducted as WHO research, following WHO procedures and rules.

In order to fulfil WHO's responsibilities and oversee its involvement in research involving human participants, WHO has established a WHO Research Ethics Review Committee (ERC) to provide ethical review of research involving human participants funded or otherwise supported by WHO. As a result, in addition to the approval required for the designation or re-designation of a WHO CC, any research activity involving human participants included in the terms of reference or work plan of the WHO CC may require the approval of the WHO ERC. The WHO responsible officer will seek such approval/s, if necessary. Approval by an ethics body other than the WHO ERC does not exempt a research activity from WHO ERC review. The decision whether or not a particular activity involving human participants requires WHO ERC review and approval is made by the WHO ERC.

All research involving human participants for which WHO ERC approval is required, must conform to the requirements set forth at http://www.who.int/rpc/research_ethics/erc/en/index.html.

It is furthermore the responsibility of the WHO CC to safeguard the rights and welfare of human participants involved in research performed as part of the terms of reference or work plan, in accordance with the appropriate national code of ethics or legislation, if any, and, the Helsinki Declaration and any subsequent amendments. Research may only be undertaken where: (a) the rights and welfare of the research participants are adequately protected; (b) freely given informed consent has been obtained; (c) the balance between risk and potential benefits involved has been assessed and deemed acceptable by a panel of independent experts appointed by the institution; and (d) any special national requirements have been met.

It is moreover the responsibility of the institution to comply with the relevant national regulations pertaining to research involving human participants.

Without prejudice to obligations under applicable laws, the WHO CC is required to make appropriate arrangements to eliminate or mitigate the negative consequences to research participants, or their families in the case of death, injury or illness resulting from the conduct of the research. Such arrangements shall, to the extent feasible, include medical treatment and financial relief. The WHO CC should furthermore undertake to protect the confidentiality of the information relating to the possible identification of participants involved in such research.

Finally, the WHO CC should ensure that living animals, required for use as laboratory animals in research undertaken by the WHO CC, shall be handled in accordance with generally accepted principles for the humane treatment of such animals and the avoidance of unnecessary suffering.

6. GUIDELINES DEVELOPMENT

A WHO Guideline is a health information product containing recommendations. All WHO guideline development activities supported by a WHO CC as part of the agreed workplan must conform to the requirements set forth in the WHO Guidelines Review Committee (GRC) rules and procedures, unless the WHO guideline in question has previously been adjudicated by WHO as being exempt from GRC review.

7. OTHER CONDITIONS

7.1 Dissemination of results through WHO media

If any of the proposed activities provides that the results will be published by WHO, or disseminated through the WHO web site or through any other WHO media, the material to be published or otherwise disseminated will be subject to specific WHO clearance processes.

7.2 WHO funds

If any of the proposed activities mentions WHO as a source of funds, such financial contribution from WHO will be subject to the availability of funds.

7.3 Liability

The WHO CC shall be solely responsible for the manner in which the activities included in the terms of reference or work plan are carried out and accordingly shall assume full liability for any damage arising from these activities. Thus, WHO shall not be responsible for any loss, accident, damages or injury suffered by any person whatsoever arising in or out of the execution of these activities.

By completing and submitting this form, the head of the proposed WHO CC confirms that:

- to the best of his/her knowledge the information provided in this form is true and complete; and
- if there is any change in the information provided in this form, he/she will promptly notify the responsible officer of WHO.

If these conditions cannot be met, an institution cannot be (re)designated as a WHO CC. If these conditions cease to be met after designation, this should be immediately reported to the responsible officer of WHO.