



# **HCV Resource Network Technical Panel**

**Mechanism for Operation - Version 2, October 2008**

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# 1 Objectives

One of the roles of the HCV RN is to provide an element of quality control and governance for the use of the HCV concept. This is particularly important when it is used outside of the context of certification since within certification there are existing quality control mechanisms.

Therefore, the Network will establish a Technical Panel whose role will be:

- To undertake peer reviews of specific HCV assessments or uses when requested to do so;
- To provide recommendations on the way in which the HCV concept should be interpreted and used in practice;
- To play a leading role in identifying the need for further development of the HCV concept, and undertaking that development;
- To inform the SG of important developments in the use of the HCV concept as these arise.

All activities of the Panel will be in line with the anti-trust commitment in the HCV RN Charter.

## 2 Membership

The HCV Technical Panel will be made up of up to 24 individuals who have signed up to the Network's Charter, and are registered Network Participants. Each individual must have a thorough understanding and practical experience of the use of the HCV concept. In order to provide the full range of skills and local knowledge needed the Panel will aim to include at least two individuals with experience from each continent and have both ecological and social expertise.

### 2.1 *Qualifications*

All Technical Panel members must have:

- Tertiary level qualifications in biological, ecological or social sciences or an appropriate equivalent;
- At least five years' experience in their field;
- A track record of working with the HCV concept. This can include activities such as involvement in an HCV National Interpretation process, implementing HCV within their own organisation, undertaking HCV assessments for third parties or auditing HCV within a certification scheme.

## ***2.2 Appointment to the Technical Panel***

All HCV RN Participants, both individuals and organisations, can nominate potential members for the Technical Panel. The Quality Control sub-committee of the Steering Group will review all nominations and select prospective members based on:

- Qualifications and practical experience of using the HCV concept;
- Balancing representation from different regions;
- Balancing biological, ecological and social expertise.

Recommendations for membership will be reviewed and confirmed by the full Steering Group who will also consider the balance of representation of different stakeholders.

## ***2.3 Length of time on the Technical Panel***

Panel members will be appointed for a maximum period of 3 years with the option to seek re-appointment at the end of this period. However, the first year will be considered a probationary period and the Quality Control sub-committee will review each member at the end of this period and decide whether or not to confirm the full 3-year appointment.

## **3 Duties of the Technical Panel**

The Technical Panel will carry out activities in response to requests from the HCV RN Steering Group or from third parties. The Technical Panel will provide two main services:

- Undertaking peer reviews of HCV-related assessments, projects or uses;
- Providing recommendations on the interpretation and use, and development of the HCV concept.

Most of this work will be undertaken via phone or email, but in some cases when providing recommendations on HCV use, it may be appropriate for the Network Secretariat to organise specific projects which provide for site visits by Panel members. There will normally be one physical meeting of the Technical Panel for 2-3 days annually facilitated by the Network Secretariat.

More specific terms of reference for the TP, including further details of activities and commitments, are described in “Terms of Reference for the Technical Panel” (Version 1, October 2008).

## ***3.1 Undertaking Peer Reviews***

### **3.1.1 What can be peer reviewed**

As the HCV concept is used in an increasing range of situations and locations, there will be an increasing need to have a competent and credible mechanism for ascertaining whether a particular application of the concept or an individual assessment is adequate or not. This type of quality control will be essential to the long-term credibility of the concept. Any use of the HCV concept is eligible for peer review. This can include review of:

- Individual HCV assessments (which includes identification of Values, development of appropriate management and monitoring plans and consultation);
- Appropriateness of the way the concept is incorporated into policies, initiatives or standards.

### **3.1.2 The peer review process**

A detailed description of the peer review process is provided in Annex 2 of the "Reviewing HCV reports" (Version 1, October 2008).

### **3.1.3 Costs and fees**

The organisation requesting the peer review will usually be asked to pay the costs of undertaking the review. This will include:

- The time required by the Secretariat for administration and, where needed, collation of peer review comments;
- The time required by the peer reviewers to undertake their reviews.

The time required and the fee rates to be used will be agreed in advance and a written proposal provided to the review applicant. This must be agreed and signed prior to a peer review process being initiated.

## ***3.2 Interpretation, use and development of the HCV concept***

As the HCV concept is used in an increasing number of situations, and in particular outside the framework of certification, many technical and methodological questions arise about what is good practice, what is an acceptable assessment, how particular aspects of the concept should be interpreted and so on. A key role of the Technical Panel will be to provide recommendations on these issues which can be considered by the Steering Group.

### 3.2.1 Recommendations on interpretation and use

1. Requests for clarification or interpretation of aspects of the use of the HCV concept must be submitted to the HCV RN Secretariat.
2. For urgent requests the Secretariat will adopt a similar approach to that outlined for peer review above.
3. For less urgent requests or requests with wide-reaching implications the issues will normally be considered at the annual meeting of the Technical Panel.
4. All requests received over the period since the last meeting will be collated and sent to Technical Panel members at least 2 weeks before the physical meeting.
5. During the meeting each request will be discussed and, where possible, a recommendation agreed and documented. Where this is not possible a work plan to resolve the issue must be agreed and documented.
6. The recommendations and work plans will be submitted to the Quality Control Sub-committee of the Steering Group for review (see below). The final recommendations and work plans will be sent to the individuals or organisations which submitted the request and be posted on the HCV RN website.
7. Any discussions or work subsequent to the meeting will be co-ordinated by the Secretariat.

### 3.2.2 Costs and fees

Urgent requests: For urgent requests where there is a need for a rapid response then the organisation requesting the interpretation will usually be asked to pay the costs of undertaking the work. This will include:

- The time required by the Secretariat for administration and, where needed, collation of comments;
- The time required by the Technical Panel members to make recommendations.

The time required and the fee rates to be used will be agreed in advance and a written proposal provided to the interpretation applicant. This must be agreed and signed prior to the process being initiated.

Other requests: Where a question or issue can be addressed during the annual Technical Panel meeting, there will not usually be a requirement to pay. This should ensure that anyone, irrespective of financial resources, can submit queries and requests for clarification.

## **4 Oversight by the HCV RN Steering Group**

### ***4.1 Role of the Quality Control Sub-committee***

The Quality Control Sub-committee of the Steering Group will be responsible for the on-going oversight of the Technical Panel. This will include:

- Selecting potential members of the Technical Panel based on a review of nominations received from Network Participants and on the guidelines set out in Section 2.2 and submitting these to the full Steering Group (see below);
- Reviewing the performance of Panel members at the end of their one-year probationary period and confirming (or not) their continuing membership;
- Receiving notification from the Secretariat of the names of Panel members selected to review particular requests, and raising and helping to resolve any concerns (usually within 2-3 days);
- Receiving copies of the outcome of each peer review or interpretation and commenting where necessary (usually within 7 days);
- Receiving the output of any Technical Panel physical meetings and commenting (usually within 14 days) on any issues;
- Informing others on the Steering Group of any important issues which arise and need wider input.

### ***4.2 Role of the full Steering Group***

The Steering Group will undertake a full review of the operation of the Technical Panel over the previous 12 months at each annual physical meeting of the Steering Group. This will include:

- A review of membership including confirmation of any proposed new members recommended by the Quality Control Sub-committee;
- A review of all activities undertaken by the Technical Panel including reviews and interpretations carried out;
- A review of any issues raised by the Technical Panel, by Network Participants or by others with respect to the Panel's work and recommendations;
- A review of any complaints (see Section 5).

During the rest of the year, the Steering Group will be informed of all outcomes from the Technical Panel and will be asked to be further involved, either through email discussions or – at the discretion of the Co-chairs – via a conference call in the following circumstances:

- Where new members of the Technical Panel need to be confirmed in between annual Steering Group meetings;

- If the Quality Control Sub-committee feels that an issue raised or an outcome of the Technical Panel is of such significance that the whole Steering Group needs to be involved in discussions;
- If a complaint needs to be resolved (see Section 5).

## 5 Complaints procedure

1. Complaints about the work of the Technical Panel will be accepted from Peer Review applicants, an organisation involved in a reviewed project or any Network Participant.
2. Complaints must be submitted in writing to the Quality Control Sub-committee via the HCV RN Secretariat.
3. If the Quality Control Sub-committee considers the complaint to be straightforward then it will respond directly in writing, usually within 14 days (if a longer period is required the complainant will be informed in writing by the Secretariat).
4. If the Quality Control Sub-committee considers the complaint to be more serious or wide-reaching in scope, or if the complainant is not happy with the response from the Quality Control Sub-committee, then it will be raised to the full Steering Group for discussion.
5. The timeframe for the Steering Group to address the complaint will be agreed by the Co-chairs and communicated to the complainant in writing by the Secretariat. This will not normally be more than 2 months.
6. The Steering Group will discuss the complaint by email, conference call or during a physical meeting and document the outcome of the discussion, including a plan to resolve the issue where appropriate. The findings of the Steering Group will be communicated to the complainant via the Secretariat. The Steering Group's decision will be final.