

Report of the Fourth Meeting of the
Subcommittee on Policy and
Programme Development and
Management (SPPDM)

WHO-SEARO, New Delhi, 1 July 2011



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Introduction

The Fourth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM) was held at the WHO Regional Office for South-East Asia (SEARO), New Delhi, on 1 July 2011. High-level delegates represented their respective Member States at the meeting. The agenda and list of participants are attached as Annexes 1 and 2 respectively.

1. **Inaugural session** (*Agenda item 1*)

Opening remarks by the Regional Director

Welcoming the distinguished delegates, Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia, informed that there would be only two substantive items on the agenda of the SPPDM, i.e. implementation of Programme Budget for 2010-2011 and Proposed Programme Budget for 2012-2013.

Explaining the two agenda items of the meeting, Dr Samlee said that there was a need to ensure complete implementation of workplans for the biennium 2010-2011 by the end of 2011 with high quality outputs and outcomes. For the Proposed Programme Budget 2012-2013, there was a need to utilize the available resources in the most efficient and effective manner in view of the drastic budget cuts. Economy measures must be taken and special efforts are required to mobilize more resources.

Dr Samlee hoped that with the level of sustained support from the Member States and their combined wisdom, WHO would be able to cope effectively with the budget crunch in the years to come.

The Regional Director informed participants that the outcome of deliberations of the Subcommittee would be directly presented to the Sixty-fourth Session of the Regional Committee to be held in September 2011.

He wished the delegates fruitful deliberations and active participation.

Nomination of Chairperson and Rapporteur

Mr Keshav Desiraju, Additional Secretary (Health), Ministry of Health and Family Welfare, India, was elected Chairperson.

Mrs Niniek K. Naryatie, Chief, Center for International Cooperation, Ministry of Health, Indonesia, was elected Co-Chairperson.

Mr Jayendra Sharma, Planning Officer, Planning and Policy Division, Ministry of Health, Bhutan, was elected Rapporteur.

2. Programme Budget Matters (*Agenda item 2*)

2.1 Implementation of Programme Budget 2010-2011 (*RC64 Provisional Agenda item 4.2*)

Introduction

A. Technical Implementation of PB 2010-2011

Implementation of Programme Budget 2010-2011 was reviewed in relation to both the achievement of results and financial utilization. Four separate monitoring processes had been carried out at the end of 2010 to gauge the implementation of expected results. These included the Medium-Term Strategic Programme (MTSP) Interim Assessment, the Mid-term Review, the End-of-Year Review and Workplan monitoring.

The findings of the MTSP interim assessment indicate that Member States of the SEA Region feel that maximum progress has been made towards the attainment of Strategic Objectives 1 (communicable diseases) and 5 (emergency preparedness and response) while the least progress has been recorded in relation to Strategic Objectives 3 (noncommunicable diseases) and 11 (medical products and technologies).

Findings of the Mid-term and End-of-Year Review processes show that of 1204 Office-Specific Expected Results (OSERs) across the Region, 193 (16%) were considered "at risk" of not being fully achieved by the end of the biennium, and 61 (5%) were considered "in trouble".

As regards workplan monitoring, of 9113 products and services in SEA Region workplans, 639 (7%) were deemed “at risk” or “in trouble”. Of this number, 324 products and services had not yet started, or were showing very slow implementation.

Main reasons for the “at risk” and “in trouble” progress ratings included: lack of funding, especially owing to over-reliance on specified funding; absence of dedicated staff for some areas; insufficient advocacy and partnering for certain areas; delays occasioned by organizational restructuring; delays owing to GSM roll-out; and administrative delays.

Based on the findings of its results monitoring, the Secretariat has initiated various corrective actions and other measures to improve implementation during the remainder of the biennium. These include: providing target technical support to countries; scaling up resource mobilization efforts; increased advocacy for certain areas; reprogramming of certain activities; redistribution of under-utilized funds; reviewing HR procedural delays and administrative standard operating procedures; and organizing a second wave of GSM training.

B. Financial implementation of PB 2010-2011

The Sixty-second World Health Assembly approved the budget of US\$ 544.5 million for the WHO South-East Asia (SEA) Region. The budget comprised US\$ 102.3 million from Assessed Contributions (AC) and US\$ 442.2 million from Voluntary Contributions (VC). The approved budget represents a 10.8% increase over the approved budget of 2008-2009.

The Operational budget for 2010-2010 stands at US\$ 501.8.

As of 31 May 2011, 97% of the Region’s AC funds had been allocated to workplans and about US\$ 282.6 million of VC were available, either from funds carried over from the previous biennium or through new resources mobilized during the current biennium.

The VC income projection for the SEA Region is about US\$ 340 million (6% increase) compared with the actual VC income of US\$ 322 million in the 2008-2009 biennium.

In order to implement the Programme Budget for this biennium, there is a strong need to accelerate the current rate of implementation. It is projected that at the current rate of implementation, the Region will reach a

total implementation rate by the end of the biennium of about US\$ 348 million.

Monitoring of financial implementation has been intensified in recent years through improved transparency due to the GSM system implemented at the beginning of the biennium, and through monthly monitoring of implementation in all areas of the Region.

The problems of uneven distribution of VC funding persist although efforts are being taken to support programmes and countries with low resource mobilization.

Discussion points

- The Subcommittee expressed concern about those expected results considered to be “at risk” of not being fully achieved or “in trouble” as per findings of the end-of-year and mid-term review monitoring exercises and requested information as to which specific OSERs fell into these categories.
- The Subcommittee discussed the uneven distribution of VCs across countries and the importance of targeted resource mobilization efforts to address the funding gaps in priority areas. The particular challenges faced by countries with great needs to mobilize resources was stressed.
- Concern was expressed on the capacity to fully implement the planned budget by the end of the biennium, especially in priority areas.
- The need to reprogramme funds from areas where implementation is low to areas where funding is limited but there is capacity for implementing high priority projects was raised. In addition to consideration of priority areas, it is also important to assess the country’s capacity to absorb any additional funding during redistribution of resources.
- The Subcommittee discussed the possibility of granting limited access to GSM to National Counterparts, as has been done by some other UN agencies with similar systems. This would enable better monitoring of the implementation and funding situation on-line.

Recommendations

Action by Member States

- (1) Member States should enhance collaboration with WHO in relation to resource mobilization efforts.

Actions by WHO/SEARO

- (2) The working paper on this Agenda item should be revised in the light of discussions and recommendations of the fourth SPPDM and be presented for consideration of the Sixty-fourth Session of the Regional Committee
- (3) Regularly share information on the financial situation of WHO and results monitoring in a suitable format.
- (4) Explore the possibility of making certain modules of GSM available to national counterpart organizations.
- (5) Scale up efforts to mobilize additional funding to required areas in collaboration with Member States.
- (6) Accelerate reprogramming of funds to priority projects to improve the implementation until the end of the biennium.
- (7) WHO to do its utmost to ensure that fixed-term staff are in place for priority areas with funds from Assessed Contributions.

2.2. Proposed Programme Budget 2012-2013

(RC64 Provisional Agenda item 4.3)

Introduction

The Global Programme Budget for the 2012-2013 biennium has been reduced to US\$ 3.95 billion with US\$ 1.03 billion from Assessed Contributions (AC).

It is recognized as a “transitional budget” that will help the Organization to respond to financial austerity and prepare for reforms being proposed. It reflects levels of implementation in 2008–2009, and takes into consideration the projections of total income and expenditure for the current biennium.

Accordingly, the Programme Budget for the SEA Region has been reduced to US\$ 384.2 million for the biennium 2012-2013. It's a 29% reduction from the current biennium and a 24% reduction from figures that were presented to the Sixty-third session of the Regional Committee in September 2010.

However, within the proposed PB of 2012-2013, there is special emphasis on Strategic Objectives 3, 4, 6, 9 and 10 which are the Organization's priority objectives. What are the possible challenges that the SEA Region will face in relation to change of Programme Budget? And how should we move forward? These are the areas that have to be carefully examined to ensure that any possible adverse effects caused by the low Programme Budget can be minimized.

WHO continues its efforts to improve programme management capacities in Member States with the objective of strengthening the efficiency and effectiveness of programme implementation. There is a critical trade-off between mobilizing more funds to implement projects in countries and building capacity to efficiently implement these projects.

Discussion points

- The discussion on the criteria for the reduction of the Programme Budget 2012-2013 revealed that the "level of expenditure in 2008-2009 biennium" and "the projected expenditure level of 2010-2011 biennium" had been used globally to decide the degree of reduction.
- The distribution of the Programme Budget (AC and VC) by WHO headquarters is under 13 appropriation sections which are synonymous with Strategic Objectives. It restrains the Regional Office and country offices to facilitate a bottom-up planning process.
- For the current biennium, the SEA Region has already mobilized US\$ 282.6 million under Voluntary Contributions. The major portion of the Voluntary Contributions is earmarked by country and by Strategic Areas which subsequently get translated to Strategic Objectives. Some countries of the region have less opportunities to generate VC funds and are at a disadvantage in comparison with others.

- The need to promote efficiency across all levels of the Organization was emphasized while more clarity was sought on measuring this efficiency. The current ongoing work in relation to introducing efficiency measures at the regional and country levels was described.
- The Programme Budget has been reduced significantly in several priority SOs, namely SO 4, 6 and 9, which are on Maternal and Child Health, Health Promotion, and Tobacco and nutrition respectively. Although it was clarified that the proposed level of PB for 2012–2013 was based on current levels of income, it was stressed that WHO should ensure that its collaborative programme will not get affected in SEA Region countries.
- While the overall Programme Budget of SOs 3, 4, 5, 6, 9, and 10 has been reduced, there is a significant increase in AC funding for the said SOs for 2012–2013.
- The need to provide financial information by SO and by Country on income from Voluntary Contributions for the 2010–2011 period was emphasized.
- The need for countries to have an integrated mechanism to monitor and evaluate donor assistance was stressed.

Recommendations

Actions by WHO/SEARO

- (1) Revise the working paper on this agenda item in light of discussions and recommendations of the fourth SPPDM and present for consideration of the Sixty-fourth Session of the Regional Committee.
- (2) Provide regular information to Member States on voluntary contributions already mobilized or in the pipeline.
- (3) Continue targeted resource mobilization efforts for countries with great need.

- (4) In collaboration with Member States, to emphasize at the World Health Assembly and Executive Board deliberations the need to improve bottom-up planning processes and reduce the number of appropriation sections (Strategic Objectives) to allow enhanced flexibility for the 2014-2015 programme budget development process.

3. Adoption of the report

The SPPDM reviewed the draft report of the meeting agenda-wise, focussing on the discussions held among the delegates and the recommendations arrived at on each agenda item. The SPPDM adopted the report with some modifications, and requested the Regional Director to convey its recommendations to the Sixty-fourth Session of the Regional Committee.

4. Closure

Dr Samlee Plianbangchang, Regional Director, in his concluding remarks thanked all the distinguished high-level delegates for their deliberations. He expressed his particular appreciation for the Chairperson, Mr Keshav Desiraju of India, and Co-chairperson, Mrs Niniek K. Naryatie of Indonesia, for the effective manner in which the meeting was conducted. Dr Samlee also thanked the Rapporteur, Mr Jayendra Sharma of Bhutan, for the excellent report. He appreciated the concise recommendations made and assured the participants that the Regional Office would take urgent action to implement all the recommendations made by the SPPDM.

The Chairperson, Mr Keshave Desiraju, thanked all the distinguished participants for their active participation in the meeting. He then declared the meeting closed.

Annex 1

Agenda

1. Opening session
2. Programme Budget matters:
 - 2.1 Implementation of Programme Budget 2010-2011
(RC64 Provisional Agenda item 4.2)
 - 2.2 Proposed Programme Budget 2012-2013
(RC64 Provisional Agenda item 4.3)
3. Concluding session

Annex 2

List of participants

Bangladesh

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Director
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Directorate-General of Health Services
Ministry of Health and Family Welfare

Bhutan

Mr Jayendra Sharma
Planning Officer
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DPR Korea

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Vice Minister
Ministry of Public Health

Mr Ri Su Nam
Official (Interpreter)
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Mr Keshav Desiraju
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Mr Sanjay Prasad
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Mr K. Srinidhi
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Dr Athula Kahandaliyanage
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This publication is the report of the Fourth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM), which met on 1 July 2011. The subcommittee was established by the Sixtieth session of the Regional Committee for South-East Asia in 2007.

Delegates from Member States of the Region discussed the agenda items proposed for the Sixty-fourth Session of the Regional Committee related to programme budget: Implementation of Programme Budget 2010-2011 and Proposed Programme Budget 2012-2013.

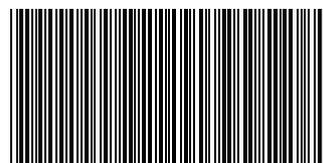
The SPPDM meeting made observations and recommendations for consideration by the Sixty-fourth Session of the Regional Committee.



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