

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

WHO-SEARO, New Delhi, 14 July 2017



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Introduction

The Tenth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM) was held at the WHO Regional Office for South-East Asia in New Delhi on 14 July 2017. High-level delegates from all Member States attended the meeting.

The Agenda and list of participants of the meeting are given in Annexure 1 and 2 respectively.

1. Opening Session

Opening remarks by the Regional Director

The Regional Director, Dr Poonam Khetrpal Singh, extended a warm welcome to all the distinguished delegates. She was happy to note that most of the participants of the High-Level Preparatory (HLP) Meeting were attending the SPPDM, which made for continuity of programme development and management at the country level. She explained that the SPPDM is a subcommittee of the Regional Committee and deals primarily with WHO policy, programme development and management-related matters.

The meeting would review the performance in implementing the biennial Programme Budget 2016–2017. The focus would be on whether the scarce budget had been spent as planned and where it was most needed. Dr Singh stressed the need to improve the quality of implementation without compromising on quality and results of activities. This would bolster the Region's claim for a higher Strategic Budget Space Allocation in the future.

This year, an Agenda item on Transparency, accountability, monitoring and evaluation has been included. A Regional Framework for Evaluation has also been developed to foster a culture of independent evaluation in the Region. This would also be done by actively engaging

Member States at the Regional Committee, and seeking their guidance on global, regional and country reform matters.

In the context of the World Health Assembly Decision WHA69(8) and Regional Committee Decision SEA/RC69(1), a three-member working group, comprising Bhutan, Maldives and Sri Lanka, discussed measures to align the process of nomination of the Regional Director. The SPPDM will submit the report of the working group to the Regional Committee.

The meeting would also review the Programme Budget for 2018–2019 approved by the Seventieth World Health Assembly. This budget would be the basis for detailed operational planning, and for reporting, evaluating and establishing greater accountability.

Dr Singh concluded by saying that the collective efforts of Member States and the Regional Office would help in realizing the Sustainable Development Goals.

Nomination of Officebearers

His Excellency Mr Faizal Cassim, Deputy Minister, Ministry of Health, Nutrition and Indigenous Medicine, Sri Lanka, was elected as Chairperson.

His Excellency Dr Kim Hyong Hun, Vice-Minister, Ministry of Public Health, Democratic People's Republic of Korea, was elected as Co-Chairperson, and Dr Slamet, Special Adviser to the Minister for Health Technology and Globalization, Ministry of Health, Indonesia, as the Rapporteur.

2. Programme Budget matters

2.1 Programme Budget 2016–2017: Implementation and mid-term review *(RC70 Provisional Agenda item 7.1)*

The Programme Budget 2016–2017 is the second of the three biennial budgets to be formulated within the Twelfth General Programme of Work for the period 2014–2019. Its content and structure provide for greater

transparency and accountability for the Organization's work, and a strengthened framework for results-based management.

The WHO Secretariat had presented to the Seventieth Session of the World Health Assembly an overview of the financial situation: Programme Budget 2016–2017, together with the WHO mid-term programmatic and financial report for 2016–2017, including audited financial statements for 2016. The Assembly accepted the WHO mid-term programmatic and financial report for 2016–2017, including audited financial statements for 2016.

The approved Programme Budget for the WHO South-East Asia Region for the period 2016–2017 is US\$ 365.1 million; and the allocated Budget is US\$ 373.9 million. Total distributed resources as on 31 May 2017 were US\$ 327.2 million; and implementation (expenditure) stands at US\$ 213.8 million, which was 57% of the allocated Budget and 65% of the distributed resources. Funds utilization (encumbrances plus expenditure) stands at US\$ 241.3 million, which is 65% of the allocated Budget and 74% of the distributed resources.

Discussion points

- Member States expressed their appreciation to WHO for the presentations and updates provided on the current status of Budget implementation and review (SEA/RC70/4) and outlined a number of developments and achievements at the national level in this area. Recent improvements in the pace of implementation have contributed to a range of major health gains in the Region, including the elimination or reduction of certain diseases in several countries.
- Member States commended the various public health achievements in the Region under the umbrella of the Regional Director's Flagship initiatives and the implementation of the Regional Framework for Evaluation.
- Member States noted with appreciation that SEARO's implementation rate was the highest globally among Major Offices and hoped that this momentum would be sustained.

- The results of the technical implementation exercise completed on 31 December 2016 were noted as well as the initiation of ad hoc monitoring of the Top Tasks in June 2017. The secretariat was requested to provide updates on the latest assessment and monitoring exercise at the Seventieth Session of the Regional Committee.
- Member States also conveyed their apprehensions about the self-assessment technique adopted for monitoring and evaluation. It was informed that reliability is ensured through quality control of submissions by budget centres through a process of review at the Regional Office and at headquarters level.
- Member States expressed concern over the funding gaps, particularly at the country level, which are due to the change in the global environment and change in donor priorities. These are being addressed through introduction of a number of cost-saving initiatives and concerted efforts to mobilize resources. There is tremendous potential to raise funds at the country level.
- In response to the concern regarding resource mobilization as well as the compromised momentum of implementation in the Region owing to reduced resources, WHO briefed the delegates on the following:
 - The global environment for provision of resources by the donors has seen a shift owing to change in donor priorities.
 - Concerted efforts are being made at the global level to mobilize resources and distribute these at the regional levels. However, the SEA Region will continue efforts to raise resources at the country level.
 - The eight Regional Flagship Priorities focus on strategic spending of the available funds to achieve the desired results.
 - Cost efficiencies have been introduced to manage more with less.

- The introduction of the WHO Emergencies Programme during the biennium 2016–2017 resulted in reduced fund availability for other programmes.
- Member States requested for strengthening of technical and financial monitoring and resource mobilization efforts.
- Concern was expressed over means of prioritization of critical activities owing to fewer available resources, and a request was made for an update on this at the Seventieth Session of the Regional Committee.
- The SEA Region is striving towards managing more with less staff and currently has the lowest HR costs compared with most other WHO regions.
- Member States noted the low implementation level of the new WHO Health Emergencies Programme at 33%. It was noted that this was a new programme implementing newly allocated funds and it is expected that the utilization will improve by the end of the biennium.

Recommendations

Actions by WHO

- (1) Continue to monitor technical and financial implementation and further intensify resource mobilization efforts to minimize the funding gaps.
- (2) Finalize the 2018–2019 workplans and start early implementation. Integrate WHO's "Value for Money" concept which contains key dimensions of economy, efficiency, effectiveness, equity and ethics, while preparing the 2018–2019 workplans and costing of outputs, project management and Key Performance Indicators.
- (3) Provide updates to the Regional Committee on the technical and financial monitoring and resource mobilization situation.

- (4) Provide guidance and support to Member States on strengthening resource mobilization and programme prioritization efforts.

2.2. Programme Budget 2018–2019

(RC70 Provisional Agenda item 7.2)

The Programme Budget 2018–2019 approved by the Seventieth World Health Assembly is to be the primary instrument for expressing the full scope of work of the Organization, along with the roles and responsibilities of all levels of the Organization (country offices, regional offices and headquarters). It will be the basis for the detailed 2018–2019 operational planning that has already been initiated, as well as the basis for reporting, evaluating and accountability.

As the third and last Programme Budget within the Twelfth General Programme of Work, the Programme Budget 2018–2019 is in line with leadership priorities and strategic directions indicated and programmatic structures set therein. Through the Programme Budget 2018–2019, WHO is taking the opportunity presented by the 2030 Agenda for Sustainable Development to strengthen its leadership in global health and enhance its support at the country level.

During the planning process, the WHO country offices identified their priorities for 2018–2019 in consultation with the respective national authorities. They also identified the critical outputs on which the WHO country offices would work on the collaborative programme for the 2018–2019 biennium. Budgets were worked out by the country offices based on their outputs. They were collated and the Regional Programme Budget was developed based on this bottom–up planning process. The regional requirement was submitted to WHO headquarters during the development of the Global Programme Budget for 2018–2019.

The Seventieth World Health Assembly endorsed the Programme Budget 2018–2019 for the South-East Asia Region at US\$ 344.3 million. The Region's Base Budget in Programme Budget 2018–2019 shows a net increase of US\$ 2 million over Programme Budget 2016–2017, even after the application of the Strategic Budget Space Allocation. The budgetary increase is mainly due to the new Health Emergencies Programme, and the

antimicrobial resistance (AMR) and noncommunicable disease (NCD) programmes.

Briefly considering the technical highlights of Programme Budget 2018–2019 for the SEA Region, these may be placed into six categories:

- Category 1 consists of six Programme Areas that are highly relevant to the SEA Region: malaria elimination; prevention and control of tuberculosis and HIV/AIDS; measles elimination and rubella control by 2020; finishing the task of eliminating diseases on the verge of elimination (kala-azar, leprosy, lymphatic filariasis and yaws); AMR; and tuberculosis.
- Category 2 now comprises six programmes: food safety; prevention and control of NCDs; tobacco control; violence and injuries; nutrition; and mental health.
- Category 3 includes intensified support to countries to end preventable maternal, newborn and child deaths in the Region. Further efforts will be made to improve synergies with other programme areas of ageing, health and gender, equity and human rights, and social determinants of health, as well as the health impacts of environmental risks.
- Category 4 covers health systems strengthening and focusing on building resilient, integrated health systems in support of universal health coverage. It also includes the secretariat of the Asia Pacific Observatory on Health Systems and Policies (a collaborative partnership of interested governments, international agencies, foundations, civil society and the research community), which has moved from the Regional Office for the Western Pacific to the Regional Office for South-East Asia in 2016.
- Category E covers emergency preparedness and response, focusing on meeting national Core Capacity requirements under the International Health Regulations (2005). A new WHO Health Emergencies Programme has been established in the Region.

- Category 6 work on enhancement includes strengthening transparency, accountability, risk management, evaluation, and corporate learning. The SDGs move to Category 6.

It is expected that the Organization will achieve a fully financed Programme Budget in 2018–2019.

In the South-East Asia Region in 2018–2019, an additional budget is proposed to further strengthen work in the areas of accountability, evaluation and transparency, as well as communications.

The distribution of the Programme Budget sets out a US\$ 344.3 million budget space for the South-East Asia Region, with a country office-level budget space of US\$ 230.0 million, and a Regional Office-level budget space of US\$ 114.3 million.

When compared with the Programme Budget 2016–2017, the budget for Categories 3, 4 and 6 has been decreased by US\$ 5.5, US\$ 3.4 and US\$ 1.9 million, respectively, and polio by US\$ 21.5 million. The Programme Budget for all other Categories has been increased.

Final regional budget allocations among the country offices and Regional Office departments will be established only during the operational planning fine-tuning in the later part of 2017, and this will be based on the country priorities.

The Subcommittee was requested to review the Approved Programme Budget 2018–2019 and the ongoing operational planning for the 2018–2019 biennium for the South-East Asia Region, and provide its observations and recommendations.

Discussion points

- Programme Budget 2018–2019 is the last programme budget under the Twelfth General Programme of Work and is the primary document for defining the scope of the work of the Organization.
- Active participation of the Member States at the Executive Board resulted in the Region getting a US\$ 2 million increase in Programme Budget against a no-growth budget presented.

- The united voice of the Member States assisted in the materialization of a 3% increase in the Assessed Contribution.
- Though the polio budget has seen a reduction, it is imperative to maintain the polio-free status of the Region.
- A decrease in the budget of Category 4 which also pertains to the area of access to medicines may throw up a challenge though most shifts are due to a change in priorities of Member States.
- Member States appreciated the importance being laid on transparency and accountability and maintaining a budget for this area despite a reduction under corporate services/enabling functions.
- A fully approved Programme Budget provides for more flexibility.
- One reason for the gradual decrease in the Budget for the Region is the reduction in the polio budget, which has been constantly declining.
- Appreciating the early operational planning and the benefits of early implementation, emphasis was laid on ensuring the availability of workplans before 1 January 2018.
- While operational planning has been launched globally on 13 July 2017, the SEA Region has started preparatory activities in this regard over a month in advance.
- Member States appreciated the budget shifts from the Regional Office to country offices in the areas of polio and the WHO Health Emergencies Programme.

Recommendations

Actions by Member States

- (1) Continue active participation in discussions related to the Programme Budget 2018–2019 at the regional and global Governing Body meetings.

- (2) Provide timely inputs to the WHO country offices to enable finalization of country workplans following peer review to meet the deadline of entering workplans in GSM by 30 September 2017.
- (3) Actively participate in the peer review of 2018–2019 workplans slated for 20–22 September 2017 in the Regional Office.

Actions by WHO

- (1) Provide detailed information on the operational planning process along with allocation by country offices and Regional Office Budget Centres to the Regional Committee.
- (2) Continue to provide required support to Member States through WHO country offices for timely finalization of workplans for 2018–2019.
- (3) Make available comparative information on country-wise as well as Category-wise allocation of the Programme Budget to country office Budget Centres for the 2014–2015, 2016–2017 and 2018–2019 bienniums to the Seventieth Session of the Regional Committee.
- (4) Present the draft resolution on the Programme Budget 2018–2019 for consideration of the Regional Committee at its Seventieth Session.

2.3 Transparency, accountability, monitoring and evaluation *(RC70 Provisional Agenda item 7.3)*

Introduction

- The International Aid Transparency Initiative (IATI) launched in parallel with the information disclosure policy is one of the very important steps undertaken by WHO globally, as a part of the Director-General's reinforced commitment to the transparency initiative.
- The Independent Expert Oversight Advisory Committee (IEAOC) assessed the various initiatives undertaken by the South-East Asia

Region, and the Region was commended for its performance on the various reform initiatives undertaken. This has been an excellent indicator of the concerted efforts of Member States towards strengthening compliance and risk management.

- The Region has also highlighted important gains in the efforts towards securing increased compliance with WHO rules and regulations. Despite a decreased budget for Corporate services and enabling functions for Programme Budget 2018–2019, measures have been undertaken towards an increased focus on compliance, accountability and risk management.
- The Region also took ownership of the concept of administrative and programmatic review missions developed by the Office of Compliance, Risk Management and Ethics (CRE) by implementing the country review missions conceptualized through a centralized system. Nine out of the 11 countries have been reviewed so far.
- As a part of the strengthened evaluation culture in the Region, the WHO South-East Asia Regional Framework for Strengthening Evaluation for Learning and Development has been developed and presented as an information document. The Region has also aligned its regional independent evaluation policy to the WHO Evaluation Policy and completed two independent evaluations. An additional two evaluations were underway: (i) Tobacco control through MPOWER measures in SEAR Member States, and (ii) Collaboration with WHO and WHO collaborating centres in the SEA Region.
- In the context of World Health Assembly Decision WHA69(8) and in line with the Regional Committee Decision SEA/RC69(1), the step-by-step towards formation of the working group to Align the Process of Nomination of the Regional Director and its recommendations were presented. The recommendations entailed the adoption of the Code of Conduct, introduction of a standardized form of CV of candidates nominated for the post of Regional Director as well as the introduction of a web forum. A draft resolution introducing these as well as the subsequent amendment to the Rules of Procedure of the Regional Committee was presented. The newly introduced Framework for

Evaluation highlights how the Region will fit evaluation into Organizational learning.

- Member States were also informed about the encouraging observations from the auditors.

Discussion points

- Member States welcomed the measures to strengthen transparency and accountability in the Region.
- Renewed focus on building a strong culture of evaluation through various measures, such as conducting independent evaluations and programmatic missions to the WHO country offices, was reiterated.
- It was clarified that the Code of Conduct proposed to be adopted as a part of the alignment of the process of nomination of the Regional Director was a reflection of the norms and basic principles aiming to promote an open, fair, equitable and transparent process for the nomination of the Regional Director.
- Information was provided on the criteria for nomination of candidates for the post of Regional Director of the South-East Asia Region of the World Health Organization, which capture the experience of the candidates in the regional context as well.
- It was noted that the Regional Evaluation Framework and the corresponding evaluation workplan will be presented to the Seventieth Session of the Regional Committee.

Recommendations

Actions by WHO

- (1) Present the report of the Working Group to Align the Process of Nomination of the Regional Director and the draft resolution for consideration by the Regional Committee.
- (2) Present the Evaluation Workplan for 2018–2019 to the Regional Committee for its consideration.

3. Adoption of the report

The Chairperson, His Excellency Mr Faizal Cassim, invited the Rapporteur, Dr Slamet, to present the draft report prepared by the Drafting Group. Meeting participants reviewed the report, concentrating on the recommendations arrived at for Member States and WHO, and adopted it.

4. Closing Session

The Chairperson, His Excellency Mr Faizal Cassim, requested that the WHO Secretariat incorporate the required changes to the report and corresponding working papers that would be forwarded for consideration by the Regional Committee. A request was made that Member States be promptly provided with the final report of the meeting.

The Regional Director, Dr Poonam Khetrpal Singh, in her concluding address expressed her sincere appreciation of and deep gratitude to the Chairperson, Co-Chairperson and Rapporteur and to all participants for their active participation and valuable contributions. She called on all Member States to assist the WHO country offices in the ongoing efforts to avoid duplication and speed up the implementation of activities. She requested Member States to work closely with the WHO Regional Office to improve the utilization of resources and to identify bottlenecks and challenges. Dr Singh highlighted that the priorities identified by the countries in the Region were closely aligned with those of the Regional Office and had resulted in better implementation.

The Chairperson then expressed his thanks to the Regional Director, the WHO Secretariat and to all participants, and declared the Tenth Meeting of the Subcommittee on Policy and Programme Development and Management closed.

Annex 1

Provisional Agenda

1. Opening Session
2. Programme Budget matters:
 - 2.1 Programme Budget 2016–2017: Implementation and mid-term review
(RC70 Provisional Agenda item 7.1)
 - 2.2 Programme Budget 2018–2019
(RC70 Provisional Agenda item 7.2)
 - 2.3 Transparency, accountability, monitoring and evaluation
(RC70 Provisional Agenda item 7.3)
3. Adoption of report
4. Concluding Session

Annex 2

List of participants

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This publication is the report of the Tenth Meeting of the Subcommittee on Policy and Programme Development and Management (SPPDM), which met in New Delhi on 14 July 2017. 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 Seventieth Session of the Regional Committee related to Programme Budget matters: Programme Budget 2016–2017: Implementation and mid-term review; Programme Budget 2018–2019; and Transparency, accountability, monitoring and evaluation.

The SPPDM Meeting made observations and recommendations for consideration by the Seventieth Session of the Regional Committee.



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