

## **Report on financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board or Health Assembly**

<b>1. Resolution</b> Progress in the rational use of medicines, including better medicines for children	
<b>2. Linkage to programme budget</b>	
<b>Area of work</b>	<b>Expected result</b>
Essential medicines	<p>1. Implementation and monitoring of medicines policies based on the concept of essential medicines, monitoring the impact of trade agreements on access to quality essential medicines, and building capacity in the pharmaceutical sector all advocated and supported.</p> <p>5. Global norms, standards and guidelines for the quality, safety and efficacy of medicines strengthened and promoted.</p> <p>7. Awareness raising and guidance on cost-effective and sound use of medicines promoted, with a view to improving use of medicines by health professionals and consumers.</p>
Child and adolescent health	<p>3. Guidance and technical support provided and research conducted for increased coverage and intensified action towards improving neonatal and child survival, growth, and development.</p>
<b>(Briefly indicate the linkage with expected results, indicators, targets, baseline)</b>	
<p>The resolution is consistent with the expected results noted above and will ensure better access to essential medicines, including better medicines for children.</p> <p>The successful implementation of this resolution will assist in achieving the expected result and will be monitored by the appropriate indicators.</p>	
<b>3. Financial implications</b>	
(a) <b>Total estimated cost for implementation over the “life-cycle” of the resolution (estimated to the nearest US\$ 10 000, including staff and activities)</b> US\$ 20 320 000 over six years.	
(b) <b>Estimated cost for the biennium 2006-2007 (estimated to the nearest US\$ 10 000, including staff and activities)</b> US\$ 8 300 000 are required in relation to the Proposed programme budget 2008–2009.	
(c) <b>Of the estimated cost noted in (b), what can be subsumed under existing programmed activities?</b> US\$ 800 000.	

**4. Administrative implications**

**(a) Implementation locales (indicate the levels of the Organization at which the work will be undertaken and identify the specific regions where relevant)**

Normative, technical and coordinating work will be performed at headquarters, which will be responsible for about 2/3 of the work (more in the first two years). Overall, 34% of the financial and human resources will be allocated to regions and countries.

**(b) Additional staffing requirements (indicate additional required staff full-time equivalents, noting necessary skills profile)**

In order to perform this work in addition to existing programmes, the following supplementary staff are required: three staff in the professional category to assist with work on selection and quality of pharmaceuticals, together with 1.5 support staff in the general service category; one office-based staff member in the professional category at headquarters to coordinate technical collaboration with countries and regions. In addition, when the regional and country work commences, 0.5 professional and 0.5 general service-staff per region are likely to be required.

**(c) Time frames (indicate broad time frames for implementation and evaluation)**

Normative work has already begun and may be developed fully over the period 2007–2008. Regional and country activities will take place in the last four years of the programme.

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