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

1. Resolution Counterfeit medical products

2. Linkage to programme budget
   Strategic objective:
   11. To ensure improved access, quality and use of medical products and health technologies.

   Organization-wide expected result:
   11.2 International norms, standards and guidelines for the quality, safety, efficacy and cost-effective use of medical products and technologies developed and their national and/or regional implementation advocated and supported.

   (Briefly indicate the linkage with expected results, indicators, targets, baseline)
   The resolution is consistent with the expected result. Indicators specific to counterfeit medical products will be designed as needed.

3. Financial implications
   (a) Total estimated cost for implementation over the life-cycle of the resolution (estimated to the nearest US$ 10 000, including staff and activities)
   US$ 30 million is needed for the next five years. Of this amount, one third (US$ 10 million) is needed at headquarters for global planning and coordination between stakeholders, for global policy guidance, and for the running costs of the secretariat of the International Medical Products Anti-Counterfeiting Taskforce (IMPACT); two thirds (US$ 20 million) are needed for support activities at regional and country levels.

   (b) Estimated cost for the biennium 2008–2009 (estimated to the nearest US$ 10 000 including staff and activities, and indicating at which levels of the Organization the costs will be incurred, identifying specific regions where relevant)
   Total costs are estimated at US$ 5.2 million.

   (c) Of the estimated cost noted in (b), what can be subsumed under existing programmed activities for the biennium 2008–2009?
   US$ 2 million is already available for the biennium. This implies the need for an additional provision of US$ 3.2 million (US$ 1.2 million at headquarters and US$ 2 million at the regional and country levels).

   (d) For the amount that cannot be subsumed under existing programmed activities, how will the additional costs be financed? (indicate potential sources of funds)
   Additional funding from voluntary contributions is expected through active resource mobilization.
4. Administrative implications

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

Currently, most activities are performed at headquarters (involving the IMPACT secretariat, global advocacy and stakeholder coordination, and fund-raising) and in two WHO regions (involving the regional offices for South-East Asia and the Western Pacific).

(b) Additional staffing requirements (indicate additional required staff – full-time equivalents – by levels of the Organization, identifying specific regions where relevant and noting necessary skills profile)

At headquarters, three additional full-time equivalents will be required in the professional category, together with one staff member in the general service category. During the biennium 2010–2011, one additional full-time equivalent will be needed in the professional category in each of three regional offices (plus administrative support); during the biennium 2012–2013, three more full-time equivalents (plus administrative support) will be needed for the other regional offices (namely, those for the Americas, Europe and the Eastern Mediterranean). A total of nine full-time equivalents will be therefore required in the professional category, together with three or four full-time equivalents in the general service category. In at least 10 countries, a dedicated national programme officer will be needed.

(c) Time frames (indicate broad time frames for implementation)

The global programme will be expanded into the African, South-East Asia and Western Pacific regions (involving at least five countries) in 2009; and into all regions (involving 10 countries) during the biennium 2010–2011.