EXECUTIVE BOARD
134th session
Agenda item 10.6

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

1. Resolution: Combating antimicrobial resistance, including antibiotic resistance

2. Linkage to the Programme budget 2014–2015 (see document A66/7 http://apps.who.int/gb/ebwha/pdf_files/WHA66/A66_7-en.pdf)

Category: 5. Preparedness, surveillance and response

Programme area: Epidemic-prone and pandemic-prone diseases

In addition, combating antimicrobial resistance involves, and has implications for, a broad range of categories and programme areas.

How would this resolution contribute to the achievement of the outcome(s) of the above programme area(s)?

The resolution is of direct relevance to the outcome "Increase the number of countries with a national antimicrobial resistance (AMR) action plan".[1] The resolution will ensure global commitment by Member States and other organizations to achieve this outcome. The cross-cutting nature and health impacts of antimicrobial resistance mean that the resolution is also of direct relevance to outcomes and deliverables in other categories and programme areas.

Does the programme budget already include the outputs and deliverables requested in this resolution? (Yes/no)

Yes. However, the Programme budget 2014–2015 does not cover the implementation of the draft global action plan mentioned in operative subparagraph 2(5).

3. Estimated cost and staffing implications in relation to the Programme budget

(a) Total cost

Indicate (i) the lifespan of the resolution during which the Secretariat's activities would be required for implementation and (ii) the cost of those activities (estimated to the nearest US$ 10 000).

(i) Two years (covering the period 2014–2015)

(ii) Total: US$ 9.6 million (staff: US$ 7.4 million; activities: US$ 2.2 million)

[1] As shown on WHO's Programme budget web portal (available at https://extranet.who.int/programmebudget, accessed on 22 January 2014).

(b) Cost for the biennium 2014–2015

Indicate how much of the cost indicated in 3(a) is for the biennium 2014–2015 (estimated to the nearest US$ 10 000).

Total: US$ 9.6 million (staff: US$ 7.4 million; activities: US$ 2.2 million)

Indicate at which levels of the Organization the costs would be incurred, identifying specific regions where relevant.

At headquarters and the six regional offices: all activity costs will be implemented through headquarters; staff costs will be US$ 4.6 million at headquarters and US$ 470 000 in each regional office.

Is the estimated cost fully included within the approved Programme budget 2014–2015? (Yes/no)

It is only partially included.

If "no", indicate how much is not included.

Total: US$ 7.8 million (staff: US$ 6.6 million; activities: US$ 1.2 million)

(c) Staffing implications

Could the resolution be implemented by existing staff? (Yes/no)

No.

If "no" indicate how many additional staff – full-time equivalents – would be required, identifying specific regions and noting the necessary skills profile(s), where relevant.

Under the planning assumption that existing staff will continue to be assigned to the activities planned under the current Programme budget, including on antimicrobial resistance, additional full-time equivalent staff members will be required in order to implement this resolution, comprising one full-time equivalent at each of the regional offices and four to six full-time equivalents at headquarters (staff in professional and higher category posts with expertise in health policy, communications and project management).

4. Funding

Is the estimated cost for the biennium 2014–2015 indicated in 3 (b) fully funded? (Yes/no)

No.

If "no", indicate the funding gap and how the funds would be mobilized (provide details of expected source(s) of funds).

The funding gap is estimated at US$ 8.8 million. It will be tackled through the Organization-wide coordinated resource mobilization plan to deal with funding shortfalls in the Programme budget 2014–2015.

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