

WHO reform

Governance: options for criteria for inclusion, exclusion or deferral of items on the provisional agenda of the Executive Board

Report by the Director-General

1. At its 132nd session the Executive Board, in decision EB132(15), requested that the Director-General prepare options for criteria for inclusion, exclusion or deferral of items on the provisional agenda of the Executive Board, taking into account resolution EB121.R1 and decision WHA65(9) and the criteria underpinning the draft twelfth general programme of work.
2. During the Board's discussion, the growing volume of agenda items was highlighted, as well as the need to focus the discussion on strategic issues. Over the last 10 years the volume of the agenda items has ranged from 31 to 58 items for its January sessions and from 3 to 19 items for its May sessions. In the same period, the volume of documentation has increased steadily, reaching a new record of 73 pre-session documents for the 132nd session, as compared to 56 pre-session documents for its 124th session.
3. According to the current Rules of Procedure of the Executive Board, the provisional agenda of the Board is drawn up by the Director-General in consultation with the Officers of the Board on the basis of the provisional draft agenda prepared by the Director-General and any proposals for additional agenda items that have been received from Member States and Associate Members. Where the Director-General and the Officers of the Board find it necessary they may recommend exclusion or deferral of proposals, providing an explanation for such recommendations, and reflecting this in the provisional agenda.
4. In 2007, the Board endorsed criteria for inclusion of additional items in the provisional agenda: proposals that address a global public-health issue; or that involve a new subject within the scope of WHO; or an issue that represents a significant public health burden.¹ In addition, the Health Assembly recently (2012) decided that Officers of the Board, in reviewing items for inclusion on the Board's agenda, use criteria, including those used for priority setting in the draft twelfth general programme of

¹ See resolution EB121. R1.

work:¹ the current health situation; the needs of individual countries; internationally agreed instruments; the existence of evidence-based and cost effective interventions; and the comparative advantage of WHO.²

OPTIONS FOR CRITERIA FOR IMPROVED MANAGEMENT OF THE PROVISIONAL AGENDA

5. The Secretariat has prepared the following two options for the Board's consideration.

Option 1: Keep the eight agreed criteria. Adopt an accessible way of using them.

6. The Board, and in particular its Officers (with respect to the provisional agenda), have applied two sets of criteria in their recent consultations in order to support their recommendations on the items to be included in the agenda:

- three criteria established by the Board in 2007;
- five criteria established by the Health Assembly in 2012.

7. Experience has shown that the latter five criteria are difficult to apply operationally in order to recommend inclusion, deferral or exclusion of proposals, as they do not establish a principle or standard by which to reach a judgement.

8. A proposed approach for an accessible way of using the two sets of criteria, based on the above analysis, is as follows. It involves assessing any proposal through a two-step enquiry.

9. First, the Officers of the Board would assess whether the proposal satisfies at least one of the first set of three criteria: does the proposal address a global public-health issue; or involve a new subject within the scope of WHO; or represent a significant public-health burden?

10. If the answer were "no", the process would stop and the proposal would be excluded or deferred. If the answer were "yes", the assessment would continue, testing first how the proposal takes into account the reform priority-setting criteria (namely, the current health situation, the needs of individual countries, internationally agreed instruments, and the existence of evidence-based and cost effective interventions) and whether action on it would be consistent with the comparative advantage of WHO as an institution? Depending on the outcome of this second step – clearly a more generalized exercise – a proposal would then be included or not in the provisional agenda.

¹ See decision WHA65(9). The five specific criteria are (in full): (1) the current health situation including: demographic and epidemiological trends and changes, urgent, emerging and neglected health issues; taking into account the burden of disease at the global, regional and/or country levels; (2) needs of individual countries for WHO support as articulated, where available, through the country cooperation strategy, as well as national health and development plans; (3) internationally agreed instruments which involve or impact health such as declarations and agreements, as well as resolutions, decisions and other documents adopted by WHO's governing bodies at the global and regional levels; (4) the existence of evidence-based, cost-effective interventions and the potential for using knowledge, science and technology for improving health; (5) the comparative advantage of WHO.

² See document A65/40, Appendix 1.

11. It is further proposed that this two-step enquiry be incorporated into the “explanatory memorandum” required for all proposals for inclusion on the provisional agenda under Rule 9 of the Rules of Procedure of the Executive Board. This could be accomplished by the Board establishing guidelines for the explanatory memorandum for such items. Such guidelines would help ensure that those making proposals for new agenda items will consider all relevant criteria when preparing their proposal.

12. Guidelines for the explanatory memorandum could include:

The explanatory memorandum under Rule 9 of the Rules of Procedure of the Executive Board should specifically address, with supporting rationale, the following two questions:

Question 1. In what way does the proposal satisfy at least one of the following three criteria:

- address a global public-health issue;
- involve a new subject within the scope of WHO; or,
- represent a significant public-health burden.

Question 2. How does the proposal take into account the four reform priority-setting criteria:

- the current health situation;
- the needs of individual countries;
- internationally agreed instruments;
- the existence of evidence-based and cost effective interventions;

and would action on it be consistent with the comparative advantage of WHO as an institution?

Option 2: Replace the eight agreed criteria with a more streamlined set

13. If the two sets of agreed criteria are seen as problematic or operationally difficult to apply, the Secretariat could suggest a single set of new criteria, building on the existing practice.

14. One possibility would be to stipulate that a successful proposal must satisfy all three of the criteria in resolution EB121.R1 instead of, as at present, meeting any one of the three. To be included, a proposal for a new agenda item would have to be considered as (1) addressing a global public-health issue, *and* (2) involving a new subject within the scope of WHO, *and* (3) constituting an issue that represents a significant public-health burden. If any one element were not satisfied, the item would not be recommended for inclusion. The concept of a “new subject” would have to be further elaborated but a reasonable definition could be that a subject would be considered “new” if the Health Assembly had not considered it within the last six years.

15. Under this option, in order to streamline the analysis, the five criteria contained in decision WHA65(9) would not be used to assess proposed agenda items, although they would continue to be used for priority setting in the preparation of the draft general programme of work.

16. This option would have the effect of increasing the level of scrutiny for inclusion of an item on the provisional agenda, at the same time simplifying the consideration process by avoiding the complexity of a two-step enquiry involving eight separate criteria.

17. If this option were to be adopted, the supporting evidence that respond to the criteria would be incorporated into the “explanatory memorandum” required under Rule 9 of the Rules of Procedure of the Executive Board, guided by new accompanying instructions prepared by the Secretariat and adopted by the Board.

Amendments to Rule 10 of the Rules of Procedure of the Executive Board

18. Although the Board did not specifically address the issue of additional items of an urgent nature being proposed for the supplementary provisional agenda under Rule 10 (i.e. after the provisional agenda has been issued) in decision EB132(15), the matter is relevant to the subject of managing the Board agenda.

19. The Board may wish to consider establishing, along analogous lines to any guidelines for the “explanatory memorandum”, appropriate guidelines for “supporting statements” that must accompany proposals for items of an urgent nature for addition to the provisional agenda.

20. Such guidelines could include the following elements:

- Supporting statements under Rule 10 should be submitted in writing at the latest 24 hours before the opening of the session to which they relate.
- Statements should include an explanation of the nature of the urgency, as well as the potential risks of deferral of the issue.
- Statements should conform with the guidelines for the explanatory memorandum under Rule 9 (i.e. they should address the agreed criteria).
- Statements will be provided to the Officers and members of the Executive Board, and will be made available to all Member States and Associate Member States, on the WHO SharePoint site.

ACTION BY THE EXECUTIVE BOARD

21. The Board is invited to consider the proposed options and provide appropriate guidance.

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