Financial and administrative implications for the Secretariat of decisions proposed for adoption by the Executive Board or Health Assembly

Decision: Poliomyelitis

A. Link to the General Programme of Work and the Programme budget

1. Please indicate to which outcome in the Twelfth General Programme of Work, 2014–2019 and to which output in the Programme budget 2016–2017 this draft decision would contribute if adopted.

Twelfth General Programme of Work, 2014–2019, category 5, outcome: no cases of paralysis due to wild or type-2 vaccine-related poliovirus globally. Programme budget 2016–2017, output 5.5.4: polio legacy work plan finalized and under implementation globally.

2. Please provide a short justification for considering the draft decision, if there is no link to the results as indicated in the Twelfth General Programme of Work, 2014–2019 and the Programme budget 2016–2017.

Not applicable.

3. Please indicate the estimated implementation time frame (in years or months) for any additional deliverables.

A 3–6 month independent study of programmatic, financial and human resource consequences of the end of the polio programme, including cessation of funding, is to be completed mid-2017. The contract is to be issued in February 2017. The results are to be fully reported in January 2018, at the 142nd session of the Executive Board; progress reports are to be given at the Seventieth World Health Assembly, in May 2017, and the Executive Board at its 141st session, following the Health Assembly.

B. Budgetary implications for implementation of additional deliverables

1. Current biennium – estimated, additional budgetary requirements, in US$ millions:

The proposed decision would be supported within the existing Programme budget.

(i) Please indicate the level of available resources to fund the implementation of the proposed decision in the current biennium, in US$ millions:

- How much are the resources available to fund the proposed decision in the current biennium?
  None identified at present. US$0.6 million is needed for contracted independent study, including a consultant for 3–6 months to manage/oversee the study and travel to selected countries.

- How much would the financing gap be?
  US$ 0.6 million.

- What are the estimated resources, not yet available, if any, which would help to close the financing gap?
  As the study will be interprogrammatic, it should be supported from a central source or a donation specified for this purpose.
2. 2018–2019 (if required): estimated budget requirements, in US$ millions:
The potential cost of further development and implementation of transition plans by the Secretariat and countries is to be determined.

3. Future bienniums beyond 2018–2019 (if required) – estimated budgetary requirements, in US$ millions:
Transition is due to be completed by 2020. Essential functions necessary to maintain a polio-free world will need to be sustained after certification of eradication. These include surveillance and laboratory function, ability to respond to any re-emergence and outbreak, continued routine immunization, and containment of poliovirus in laboratories and vaccine manufacturing plants. The costs of these essential functions will be estimated at the end of 2017.