Executive Board
141st session
Provisional agenda item 6.2

Financial and administrative implications for the Secretariat of resolutions proposed for adoption by the Executive Board

Resolution: Rheumatic heart disease

A. Link to the general programme of work and programme budget

1. Outcome(s) in the Twelfth General Programme of Work, 2014–2019 and output(s) in the Programme budget 2016–2017 to which this resolution would contribute if adopted.

   **Twelfth General Programme of Work, 2014–2019 outcome(s):**
   - Increased access to interventions to prevent and manage noncommunicable diseases and their risk factors;
   - Increased access to interventions for improving health of women, newborns, children and adolescents;
   - Increased intersectoral policy coordination to address the social determinants of health;
   - Improved access to, and rational use of, safe, efficacious and quality medicines and health technologies;
   - Greater coherence in global health, with WHO taking the lead in enabling the many different actors to play an active and effective role in contributing to the health of all people.

   **Programme budget 2016–2017 output(s):**
   - Output 2.1.3. Countries enabled to improve health care coverage for the management of cardiovascular diseases, cancer, diabetes and chronic respiratory diseases and their risk factors through strengthening health systems;
   - Output 1.4.3. New knowledge, solutions and implementation strategies that respond to the health needs of disease-endemic countries developed;
   - Output 3.1.1. Countries enabled to further expand access to, and improve quality of, effective interventions for ending preventable maternal, perinatal and newborn deaths, from pre-pregnancy to postpartum, focusing on the 24-hour period around childbirth;
   - Output 4.3.1. Countries enabled to develop or update, implement, monitor and evaluate national policies on better access to medicines and other health technologies; and to strengthen their evidence-based selection and rational use.

2. Brief justification for considering the draft resolution, 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. Estimated time frame (in years or months) for implementation of any additional deliverables.

   A process to set appropriate targets and develop a comprehensive plan of action will be developed by the Secretariat during the biennium 2016–2017. Other activities referred to in the resolution will be carried out during the bienniums 2018–2019, 2020–2021 and 2022–2023.
**B. Budgetary implications**

1. **Estimated total cost to implement the resolution if adopted, in US$ millions:**
   
   US$ 13.75 million.

2.a. **Estimated additional budgetary requirements in the current biennium, in US$ millions:**

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<tr>
<th>Level</th>
<th>Staff</th>
<th>Activities</th>
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Budgetary requirements for the remainder of the biennium 2016–2017 will be accommodated within the ceiling of the Programme budget 2016–2017.

2.b. **Resources available during the current biennium**

   - Resources available in the current biennium to fund the implementation of the resolution if adopted, in US$ millions:
     
     US$ 0.60 million.

   - **Extent of any financing gap, in US$ millions:**
     
     None.

   - Estimated resources, not yet available, which would help to close any financing gap, in US$ millions:
     
     Not applicable.

3. **Estimated additional budgetary requirements in 2018–2019 (if relevant), in US$ millions:**

   1. To assess and report on the magnitude and nature of the problem of rheumatic heart disease according to agreed targets, and monitor efforts for the prevention and control of rheumatic heart disease:
      
      - staff at P3 level at headquarters to support work on rheumatic heart disease at headquarters: US$ 0.45 million.

   2. To support Member States in implementing national rheumatic heart disease programmes and strengthening health systems through improved disease surveillance, increased availability and training of the community and primary health care workforce, and ensure reliable access to affordable prevention, diagnostic and treatment tools:
      
      - updating technical guidelines on primary and secondary prevention of rheumatic heart disease: US$ 0.50 million;
      
      - providing country technical support: US$ 3.50 million.

   Total: US$ 4.45 million

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Has this been included in the Proposed programme budget 2018–2019?

Yes.
4. Estimated additional budgetary requirements in future bienniums (if relevant), in US$ millions:

2020–2021

1. To assess and report on the magnitude and nature of the problem of rheumatic heart disease according to agreed targets, and monitor efforts for the prevention and control of rheumatic heart disease:
   - staff at P3 level at headquarters to support work on rheumatic heart disease at headquarters: US$ 0.45 million;
   - activities: US$ 0.40 million.

2. To support Member States in implementing national rheumatic heart disease programmes and strengthening health systems through improved disease surveillance, increased availability and training of the community and primary health care workforce, and ensure reliable access to affordable prevention, diagnostic and treatment tools:
   - country technical support: US$ 3.50 million.

Total: US$ 4.35 million

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2022–2023

1. To assess and report on the magnitude and nature of the problem of rheumatic heart disease according to agreed targets, and monitor efforts for the prevention and control of rheumatic heart disease:
   - staff at P3 level at headquarters to support work on rheumatic heart disease at headquarters: US$ 0.45 million;
   - activities: US$ 0.40 million.

2. To support Member States in implementing national rheumatic heart disease programmes and strengthening health systems through improved disease surveillance, increased availability and training of the community and primary health care workforce, and ensure reliable access to affordable prevention, diagnostic and treatment tools:
   - country technical support: US$ 3.50 million.

Total: US$ 4.35 million

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The total additional costs for these two bienniums (US$ 8.70 million) are to be planned within the respective proposed programme budgets.