

PROVISIONAL SUMMARY RECORD OF THE TWELFTH MEETING

**WHO headquarters, Geneva
Friday, 26 January 2018, scheduled at 18:00**

Chairman: Dr A. HAFEEZ (Pakistan)

CONTENTS

	Page
Other managerial, administrative and governance matters (continued)	
Evaluation of the election of the Director-General of the World Health Organization.....	2
Amendments to the Staff Regulations and Staff Rules.....	2
Engagement with non-State actors.....	3
Future meetings of the governing bodies	
• Provisional agenda of the Seventy-first World Health Assembly.....	5
• Date and place of the 143rd session of the Executive Board	5

TWELFTH MEETING

Friday, 26 January 2018, at 18:00

Chairman: Dr. A. HAFEEZ (Pakistan)

OTHER MANAGERIAL, ADMINISTRATIVE AND GOVERNANCE MATTERS: Item 5 of the agenda (continued)

Evaluation of the election of the Director-General of the World Health Organization: Item 5.3 of the agenda (document EB142/26)

**The meeting was held in open (private) session until 19:15,
when it resumed in public session.**

Amendments to the Staff Regulations and Staff Rules: Item 5.10 of the agenda (documents EB142/38 and EB142/38 Add.1)

The CHAIRMAN drew attention to document EB142/38, which contained three draft resolutions on amendments to the Staff Regulations and Staff Rules. The financial implications of adopting those resolutions could be found in document EB142/38 Add.1. He also drew attention to paragraphs 34 to 42 of the report of the Programme, Budget and Administration Committee of the Executive Board, contained in document EB142/25, noting that the Committee had recommended that the Board should adopt the draft resolutions.

The DIRECTOR (Human Resources Management) said that the proposed amendments to the Staff Regulations and Staff Rules had been devised with the aim of improving the text's readability and comprehensibility, and had been prepared in consultation with staff representatives. Responding to questions raised at the twenty-seventh meeting of the Programme, Budget and Administration Committee, she said that Staff Rule 350 had been amended to correctly cite the authority of the Director-General to define the term "child", which was set out in the Human Resources eManual, not the Staff Rules, and was aligned with the United Nations definition. Staff Rules 650 and 655, on leave without pay and special leave, had been consolidated to make them easier to understand, to facilitate their implementation and to bring the WHO rule in line with that of the United Nations. The words "at the request of the staff member" had been removed from Rule 650, but more detailed information on special leave was available in the eManual. Staff Rule 1225 had been amended based on lessons learned in the first year of the new internal justice system, namely that three categories of administrative decisions should not be subject to administrative review because, in those categories, a peer-body review would have already considered the staff member's grievance.

The representative of NEW ZEALAND, speaking in his capacity as Chairman of the Programme, Budget and Administration Committee of the Executive Board, confirmed that the Committee had recommended that the Executive Board should adopt the three draft resolutions contained in document EB142/38 and that the Director-General should submit them to the Seventy-first World Health Assembly.

The CHAIRMAN said he took it that the Board wished to adopt the three draft resolutions contained in document EB142/38.

The resolutions were adopted.¹

Engagement with non-State actors: Item 5.5 of the agenda (documents EB142/28, EB142/29 and EB142/29 Add.1)

The CHAIRMAN drew attention to paragraphs 24 to 29 of the report of the Programme, Budget and Administration Committee, contained in document EB142/25. The Committee had recommended that the Board should adopt the draft decision contained in document EB142/29, the financial and administrative implications of which were set out in document EB142/29 Add.1. The Board was invited to note the report contained in document EB142/28.

The representative of the CONGO, speaking on behalf of the Member States of the African Region, took note of the decisions of the Programme, Budget and Administration Committee on the admission into, and continuation and discontinuation of, official relations in respect of the non-State actors mentioned in document EB142/29 and its annex, which had been made on the basis of their ability to work in accordance with the principle of transparency and free from private sector influence. He endorsed the decision to defer the review of relations with a number of non-State actors until the 144th session of the Executive Board, so as to enable the Secretariat to perform the requisite due diligence. He expressed support for the draft decision.

The representative of MEXICO welcomed the Secretariat's decisions on the admission into, and continuation and discontinuation of, official relations in respect of the non-State actors listed in document EB142/29 and its annex, and the decision to defer the review of 11 further non-State actors to the 144th session of the Executive Board. With regard to document EB142/28, the Secretariat should provide further information on the four secondments mentioned in the report, in order to ensure that they did not undermine the independence and integrity of WHO, involved no conflict of interest and met the criteria for secondment.

The representative of IRAQ said that an implementation workplan should be developed and that non-State actors should work with governmental bodies as one team. In his country, a health cluster supported Ministry of Health emergency preparedness and response activities. WHO should ensure capacity-building for non-State actors and work with them in full collaboration with health ministries.

The representative of TURKEY agreed with the view expressed in the report of the Programme, Budget and Administration Committee that it would be useful to have the perspective of, and feedback from, non-State actors on the implementation of the Framework of Engagement with Non-State Actors. That being said, no non-State actors appeared to be participating at the present meeting to provide feedback.

The CHAIRMAN said that the request to participate had been sent to all non-State actors, but only the two present had responded.

The representative of THAILAND encouraged WHO to strengthen its due diligence and risk assessment of non-State actors to ensure that their engagements were in line with the draft thirteenth general programme of work 2019–2023 and the Framework of Engagement. She supported the draft decision.

¹ Resolutions EB142.R7, EB142.R8 and EB142.R9.

The representative of the UNITED STATES OF AMERICA¹ urged WHO to take neither a risk-averse nor cavalier approach to engagement with non-State actors. Risk management was better than risk avoidance, which would only diminish WHO leadership and global health partnership opportunities. She looked forward to hearing feedback from non-State actors on how the policy was working, and would welcome updated information on the financial implications of the Framework's implementation and whether the Secretariat would be able to meet the 2018 deadline for its full operationalization.

The representative of INDIA¹ said that follow-up to the Framework of Engagement process was critical. A comprehensive policy on conflicts of interest should be developed. Any collaboration on research and development should be in line with the Framework of Engagement. Accountability would be improved if the Framework of Engagement also covered the dealings of Member States with non-State actors, and not just those of the WHO Secretariat. Implementation of the Framework of Engagement should be the responsibility of the Office of the Legal Counsel, not of the departments in charge of implementation and resource mobilization, as there could be conflict between those two functions.

The representative of ARGENTINA,¹ noting that full implementation of the Framework of Engagement was essential, asked whether the Secretariat expected to meet the 2018 deadline.

The representative of the INTERNATIONAL BABY FOOD ACTION NETWORK, speaking at the invitation of the CHAIRMAN, welcomed the evaluation of the Framework of Engagement to be conducted in 2019 and expressed concern at its failure to address conflicts of interest, sponsorships and lobbying. The terminology and the level of due diligence were also proving problematic. Citing the unofficial presence of non-State actors and industry representatives at meetings of WHO governing bodies and CODEX Alimentarius, she recommended that different categories of non-State actor should be distinguished by badge colour and that all participants, including those with public badges, be listed to improve transparency. Member States should ensure that their delegations to such meetings were free from commercial influence, and the Secretariat should take urgent action to correct the definition of conflicts of interest in the Framework of Engagement in time for the upcoming World Health Assembly.

The representative of MEDICUS MUNDI INTERNATIONAL – INTERNATIONAL ORGANISATION FOR COOPERATION IN HEALTH CARE, speaking at the invitation of the CHAIRMAN, said that there was an urgent need for further information on areas such as the number of the non-State actor's engagements in each category and the details of secondments, including rank and position of any personnel seconded. He called on the Secretariat to establish a policy on conflict of interest and ensure the effective implementation of paragraph 13 of the Framework of Engagement. It was concerning that entities linked to the alcohol industry had participated in the WHO Global Conference on Noncommunicable Diseases in October 2017, and that the co-chair of the WHO Civil Society Working Group on the third High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, to be held in 2018, also had links to that industry.

The representative of NEW ZEALAND, speaking in his capacity as Chairman of the Programme, Budget and Administration Committee, said that the Committee had been interested in the experiences of non-State actors with the revised process for re-establishing official relations with WHO, not in aspects of the Framework that they wished to see changed.

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

The ASSISTANT DIRECTOR-GENERAL (External Relations) said that WHO aimed to launch the Framework of Engagement at the Seventy-first World Health Assembly, but that the deadline could be extended if it was not fully operationalized by then, in line with the recommendation of the Independent Expert Oversight Advisory Committee. The main costs of implementation related to personnel and the development of the IT tool; budget needs would fall, however, once the Framework was operational. WHO was determined to implement the Framework efficiently, and to that end it had established a steering group to monitor implementation and answer questions on, for instance, transparency and the four categories of non-State actor.

The LEGAL COUNSEL said that the purpose of the Framework was to promote engagement with non-State actors in a way that managed conflicts of interest. Chapter 3 of the Guide for staff on engagement with non-State actors set out the position of WHO on conflicts of interest.

The DIRECTOR-GENERAL said that WHO had to manage risk without becoming risk-averse. It had to engage all players, including civil society and the private sector, with a view, for example, to achieving the Sustainable Development Goals. He had received complaints at the WHO Global Conference on Noncommunicable Diseases after representatives from the food and beverage industries were invited to attend. However, it was beneficial to engage such industries, since doing so allowed WHO to challenge them on their morals honestly and directly. It was also an opportunity to identify areas of cooperation, understand each other better and exchange ideas. Engagement did not preclude the enforcement of regulations nor did it necessarily imply a conflict of interest. WHO would not engage the tobacco or arms industries, but it was important to engage all other sectors.

The Board noted the report contained in document EB142/28.

The CHAIRMAN took it that the Executive Board agreed to adopt the draft decision contained in document EB142/29.

The Board adopted the decision.

Future meetings of the governing bodies: Item 5.7 of the agenda

- **Provisional agenda of the Seventy-first World Health Assembly** (document EB142/31)
- **Date and place of the 143rd session of the Executive Board** (document EB142/32)

The representative of BRAZIL asked for confirmation that value for money would be discussed at the Seventy-first World Health Assembly under item 11.2, on WHO reform, while all other discussions under the item would take place at the 143rd session of the Executive Board. He asked what would be discussed under item 15.2 in relation to financing of the Programme budget 2018–2019.

The representative of JAPAN said that his Government wished to discuss patient safety at a future session of the Executive Board, as it was an important aspect of universal health coverage.

The representative of ZAMBIA, supported by the representatives of the UNITED REPUBLIC OF TANZANIA, ALGERIA, SWAZILAND, TURKEY and ANGOLA,¹ proposed that a draft

¹ Participating by virtue of Rule 3 of the Rules of Procedure of the Executive Board.

resolution on cholera prevention be discussed under item 11.3 (Public health preparedness and response) of the provisional agenda of the Seventy-first World Health Assembly. There was a pressing need for a renewed focus on the growing public health threat of cholera, which would only be exacerbated by climate change. The strategy recently launched by the Global Task Force on Cholera Control, “Ending Cholera – A Global Roadmap to 2030” aimed to reduce cholera-related mortality by 90% by 2030, in line with the Sustainable Development Goals, and to eliminate the disease in up to 20 countries. Those objectives would be achieved by enhancing case detection, surveillance and outbreak response, and by strengthening prevention and preparedness through a multisectoral approach, but would require high-level political commitment and strategic leadership.

The representative of CANADA asked whether the draft resolution would need to be linked to an existing item of the agenda, or whether a new item would need to be requested, and for details of the process for requesting a new item.

The SECRETARY said that, if the proposal was to submit a draft resolution, that resolution would have to be linked to an item already on the provisional agenda, in the case at hand, item 11.3; in accordance with Rule 48 of the Rules of Procedure of the World Health Assembly, the formal draft would have to be submitted to the Health Assembly by the end of the first day of the session. If, however, the intention was to request that a new item should be added to the provisional agenda, then that request should be made to the Board at its present session and, if the Board agreed, the Secretariat would prepare a report on cholera for consideration at the Health Assembly, along with any draft resolution.

The representative of ZAMBIA confirmed that the intention was to submit a draft resolution under an existing agenda item.

The representative of FIJI asked for confirmation that item 18.1 (Evaluation of the election of the Director-General of the World Health Organization) of the provisional agenda was redundant and would be deferred to the 144th session of the Executive Board.

The SECRETARY confirmed that consideration of item 18.1 would be so deferred. Item 15.2 simply comprised an update on the Programme budget, and that the two items on WHO reform that remained to be finalized would be discussed at the 143rd session of the Executive Board.

The CHAIRMAN asked the Board to consider suspending discussion of the present item so that the documents could be amended and circulated for adoption.

It was so agreed.

The meeting rose at 20:15.

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