Report of the Programme, Budget and Administration Committee of the Executive Board

1. The thirty-first meeting of the Programme, Budget and Administration Committee was held in Geneva from 29 to 31 January 2020. The Chair was Mr Björn Kümmel (Germany). The Committee held a minute’s silence to pay tribute to the memory of Dr Peter Salama, Executive Director of WHO’s Division for Universal Health Coverage – Life Course. The Committee then adopted its agenda, with the deletion of item 3.8 as there were no proposed amendments to the Financial Regulations and Financial Rules, and agreed its programme of work.

2. The Director-General presented an update on the response to the outbreak of novel coronavirus (2019-nCoV) infection in China. He informed the Committee that he had reconvened the Emergency Committee on the novel coronavirus under the International Health Regulations (2005), which would meet the following day to advise on whether the outbreak constituted a public health emergency of international concern. The Committee would be kept updated.

3. The Director-General underlined that the outbreak illustrated why stronger health systems were necessary, and that was why WHO accorded great importance to transformation (including the results framework, which was a major element of WHO transformation). Further details of progress in the transformation process would be provided at a briefing on the subject the following day, as well as during the discussions at the 146th session of the Executive Board.

4. The Committee was fully committed to the aims of WHO transformation and appreciated the efforts made by the Organization to “move from a cycle of repeated reform to a sustainable programme of continuous improvement”. The Committee would have appreciated a dedicated agenda item for discussing progress in the transformation agenda. Given the centrality of transformation to all WHO action, it should be made fully visible to the governing bodies of the Organization, which should be given a concrete picture of the reforms at different levels of the Organization, including those implying full alignment with, and engagement in, United Nations reform.

The Committee recommended that the Executive Board should request a full update on transformation, with reforms mapped to timelines, to be provided to the Seventy-fourth

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1 The list of participants is available in document EBPBAC31/DIV./1.
2 Document EBPBAC31/1 Rev.1.
3 On 30 January, the Director-General announced his decision to declare the outbreak a public health emergency of international concern.
4 Document A72/48, paragraph 5.
5 Previous details were submitted to the governing bodies in documents A72/48 and A72/49.
World Health Assembly in 2021, through the Executive Board at its 148th session, and to be preceded by updates presented to the regional committee meetings in 2020.

Agenda item 2  Matters for information or action by the Committee

2.1 Report of the Independent Expert Oversight Advisory Committee  
(Document EBPBAC31/2)

5. The Chair of the Committee expressed his gratitude for the work of the Chair of the Independent Expert Oversight Advisory Committee, Ms Jeya Wilson, who was at the end of her mandate.

6. The Chair of the Independent Expert Oversight Advisory Committee presented the report.

7. The Committee welcomed the report and commended the African Region for the progress made in implementation of the WHO transformation agenda, noting that the Region could provide helpful examples of best practices. The Committee acknowledged that the prolonged health emergencies and ongoing conflicts hampered the implementation of WHO’s programmes and placed strain on the Organization’s resources when responding to urgent situations. The Committee gave its full support to the recommendations made by the Independent Expert Oversight Advisory Committee.

8. In the context of transformation, the Committee expressed concern regarding the overdue production of the WHO organigram, an issue raised in the report. It was pleased to learn from the Secretariat that the Director-General intended to share the new organigram with the Committee in due course.

9. In response to questions raised, the Secretariat explained that work was progressing on developing a risk appetite statement, and on defining levels of risk tolerance. Regarding the increased use of direct implementation, finalization of the policy revision under way was encouraged as well as the use of new technologies and adoption of best practices to minimize the risk of using cash. Short training videos covering topics such as prevention of fraud were being rolled out. In the African Region, it was fully understood that the necessary administrative capacity for dealing with emergencies must be in place from the outset. The Organization was making efforts to enhance the environment in which it financed the implementation of programmes in the Region. Action plans had been developed to close gaps in preparedness in over 30 countries, although funds were lacking to implement those plans. Efforts were also under way in the Region to move towards a centralized, unfragmented data system.

10. Throughout WHO, data integration and the establishment of a central data repository were key elements of transformation. The results and impact frameworks were being harmonized with the Sustainable Development Goal indicators. The transformation agenda had been largely implemented with completion set for the current budgetary biennium.

11. The Committee expressed the need for robust oversight and risk functions throughout WHO. In that regard, it asked the Independent Expert Oversight Advisory Committee to assess the anti-fraud and anti-corruption work in WHO.
The Committee noted the report of the Independent Expert Oversight Advisory Committee; it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) continue to work towards equitable distribution of funds across programmes and across major offices and undertake strategic scenario-planning linked with the enterprise risk management process;

(b) continue to implement the WHO transformation agenda, ensuring, at the same time, an increased focus on managing change fatigue among the staff, including through clear communication and consultation with staff;

(c) issue a high-level risk appetite statement for WHO, which should continue to inculcate a culture of enterprise risk management that is consistent with the intergovernmental nature of the Organization and that is risk-aware but not risk-averse; and, within the risk management process, pay special attention to compliance risks;

(d) continue to strengthen its internal controls and accountability to reinforce donor confidence;

(e) ensure greater alignment between the results framework and key performance indicators across the three levels of the Organization;

(f) undertake a root cause analysis of the Organization’s use of direct implementation and consider a review of its financing mechanism at the country level;

(g) accelerate implementation of the WHO Cybersecurity Roadmap;

(h) establish a central repository for health data, in order to create a “single source of truth”;

(i) provide support to countries in strengthening their public health data collection and storage;

(j) take steps to ensure that clear standard operating procedures are in place to avoid duplication with existing non-emergency programmes when moving from emergency response to emergency preparedness, and for those countries in the interregnum between emergency and normal operations;

(k) request the Independent Expert Oversight Advisory Committee to continue to monitor and report on the implementation of the Framework of Engagement with Non-State Actors, as well as on the implementation of the recommendations of the evaluation of the Framework in its future reports; and

(l) explore modalities for possible future interactions between Member States and the Independent Expert Oversight Advisory Committee between sessions.
2.2 Accountability overview

12. The Secretariat presented an accountability overview (white paper) that had been distributed prior to the meeting. The paper summarized initiatives undertaken to date, as well as steps currently being taken and planned, to: reinforce institutional accountability; strengthen WHO’s identity as a people-centred, values-driven organization; and provide an enabling environment for staff and elevate institutional performance.

13. The Committee welcomed the report and supported the action taken by the Secretariat to include and integrate accountability fully as one of the most important elements of transformation. It gave its full backing to the vision of WHO as a values-driven organization, and to its “best-in-class” aspirations.

14. The Secretariat affirmed that the approach taken by WHO was very much a joint venture between the Organization and its Member States. The Committee asked for more information on linkages between the various WHO services fulfilling the accountability functions, and on how they would work together. Appropriate systems are needed to provide an enabling environment for staff. Accountability in WHO should integrate and be integrated with accountability efforts across the United Nations common system. Given the importance of the issue under discussion, the Committee would welcome further reports on progress made. In response, the Secretariat indicated that it was currently examining the linkages between the various accountability and business integrity functions, and would value a regular dialogue with Member States in that regard. In that context, a “best-in-class” review had been conducted on the WHO investigative function, and the Secretariat was making efforts to improve the quality and effectiveness of the function.

15. The Committee concluded that robust action was required to address sexual harassment and sexual violence, and responses to complaints coming through the reporting mechanisms must be timely. Regarding sexual harassment, WHO was taking the policies issued by other United Nations entities, and by the United Nations System Chief Executives’ Board for Coordination Task Force on addressing sexual harassment in the United Nations system, as a basis and starting point for its action. WHO was looking at ways to share the draft policy on preventing and addressing sexual harassment and sexual violence with its constituents and to engage in further consultation before publishing the text.

The Committee noted the update and the contents of the white paper; it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) maintain the ongoing dialogue with Member States on accountability and business integrity;

(b) provide a clear definition of accountability and business integrity, setting out the risks of non-engagement arising from an overly conservative, risk-averse approach to operations;

(c) work towards greater harmonization and integration of the various WHO investigative mechanisms;

(d) explore possibilities for involving Member States in the current renewal of the policy on preventing and addressing sexual harassment and sexual violence before publication of the text;

(e) continue to promote a culture of accountability;
(f) ensure that appropriate mechanisms and sufficient staffing are in place to deal with all forms of misconduct, including corruption and fraud; and

(g) report regularly on accountability to the Programme, Budget and Administration Committee at its meetings in May, beginning in 2020, providing clear descriptions of how the mechanisms put in place to promote accountability operate as a system.

Agenda item 3 Matters for review by, and/or recommendation to, the Executive Board

3.1 Human resources: update (Document EB146/48 Rev.1)

16. The Committee received an update from the Secretariat on trends in the Organization’s workforce, on measures for both attracting and retaining talent, and on fostering an enabling working environment. The Secretariat drew attention to the increased representation in the workforce of women and of personnel from developing countries, and to additional measures to prevent sexual harassment and sexual violence and to promote and protect staff health and well-being.

17. The Committee heard that the United Nations General Assembly had adopted the recommendations of the International Civil Service Commission on the revision of the base/floor salary scale for professional and higher categories, as well as for ungraded staff and the Director-General, on a “no loss, no gain” basis. The amendments to the salary scale would require an amendment to Appendix 1 of WHO’s Staff Rules.

18. The Committee welcomed the report, expressing appreciation for the efforts to increase the number of women in professional and higher graded positions, to provide stipends to interns from January 2020, to further the health and well-being of all staff regardless of their location and to provide training in the prevention of sexual harassment to a large majority of staff.

19. Nevertheless, the Committee expressed concern at the increase in senior level appointments and the large number of consultants providing services to the Organization. In addition, it encouraged the Organization to finalize the implementation of its policy on sexual harassment.

20. The Secretariat noted that all new appointments to senior positions were linked to the implementation of the Thirteenth General Programme of Work, 2019–2023, for example the position of Chief Scientist. Key performance indicators had been developed not only for programmes but also for management, and each member of the senior management team would report to the Director-General at the end of the year on issues such as gender parity and geographical representation.

21. The Committee urged the Secretariat to take stronger action to employ greater numbers of women in senior positions and to ensure better geographical representation in WHO’s workforce. At the same time, it stressed the need to ensure a fair and transparent recruitment process, based on merit, at all levels and in all offices. In its reply, the Secretariat noted that the Organization’s new harmonized recruitment process was expected to improve the situation with regard to geographical and gender representation and that additional steps were being taken to encourage applications by women. A new policy on flexible working arrangements was also in preparation.

22. In the context of mobility, the Committee noted that a large number of headquarters staff were eligible for rotation to other parts of the Organization, which might have a negative impact on the Organization. The Secretariat was asked to provide clarification on realistic targets for the number of
moves in the first wave; on the level of human resources capacity to support the implementation of the mobility policy; and on measures to ensure continuity of work.

The Committee recommended that the Executive Board note the report; it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) provide further information on the increase in the number of senior appointments at the D2 grade and above and associated costs, and ensure transparent, open and competitive selection processes;

(b) maintain a sharp focus on the use of consultants and special service agreements and the associated costs, and ensure transparent selection processes;

(c) restore the policy of posting accountability compacts on the WHO website;

(d) ensure a fair and transparent recruitment process, based on merit, at all levels and offices;

(e) step up its efforts towards gender parity and equitable geographical representation;

(f) accelerate the finalization of new policies on the prevention of all forms of harassment;

(g) continue to work on the development and implementation of the geographical mobility policy, including the planned simulation exercise, ensuring the placement of the right staff members in the right positions and striking a balance between using specialists on the one hand and providing staff members with the ability to move to new positions on the other;

(h) continue enhancing the working environment so as to improve staff health and well-being and continue to encourage participation in staff learning and development programmes;

(i) ensure the safety of WHO staff members at their workplaces;

(j) integrate the United Nations Disability Inclusion Strategy and the United Nations System Mental Health and Well-Being Strategy into WHO’s human resources policies and practice; and

(k) continue to monitor, and provide further information on the transparency and costs of the internship programme.

3.2 Statement by the representative of the WHO staff associations (Document EB146/INF./1)

23. The representative of the staff associations introduced the report, raising concerns about: mobility, transformation, harassment in all its forms; and the consequences of dependence on voluntary contributions in terms of recruitment and filling posts, which include a growing workload that was being met through the increased use of contracts and special service agreements.
24. The Committee took note of the report and welcomed the engagement of the staff associations and their good working relations with senior management, noting their contribution to the implementation of the transformation agenda. Meetings of the Global Staff/Management Council should continue on a regular basis.

25. The Committee recognized that all forms of harassment, including abuse of power, should be included in the Secretariat’s revised policy on the prevention of harassment.

26. The Committee expressed concern about the increasing numbers of staff members on sick leave and the longer duration of that leave, asking for information on those matters in future Secretariat reports. It sought clarification of the reference to “bona fide staff” in paragraph 12 of the document. Furthermore, it urged that sufficient staffing and associated funding be made available for monitoring the implementation of transformation. With regards to mobility the Committee recognized that it was intended to meet the needs of the Organization and advised that it should be introduced in phases in a fair, ethical and balanced manner. Further work was needed on the issue.

27. In response to a question about the transparency of appointments of staff members, the Committee was informed that merit was given primary importance in the recruitment process.

   The Committee proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

   (a) include all forms of harassment in its revised policy for the prevention of harassment;

   (b) track the evolution of the duration of sick leave among the workforce, and of the number of staff members involved and report to the Executive Board;

   (c) update the Secretariat’s mental health policy in line with the United Nations System Mental Health and Well-being Strategy;

   (d) continue to include global geographical mobility as a key theme of meetings of the Global Staff/Management Council; and

   (e) continue to focus on the implementation of the transformation agenda with clear communication and consultation with staff.

3.3 Report of the Ombudsman (Documents EB146/INF./2 and EB146/INF./3)

28. The Ombudsman, introducing his report and the report of the Director-General, expressed his appreciation for being allowed to make the first presentation of his office to the Committee.

29. The Committee valued the work of the Ombudsman. It welcomed the recommendations made and acknowledged the engagement of senior management, especially as senior managers should be role models for the implementation of WHO’s newly defined corporate values. A broad discussion was needed on operationalizing WHO’s core values, including the need to identify potential obstacles resulting from the Organization’s current practices; policies should be reviewed and standard operating procedures agreed. The Committee also welcomed references to improving the working environment.

30. The Committee concluded that early detection of issues was paramount, and it endorsed the recommendations set out in paragraph 17 of document EB146/INF./2. Further, it supported the need
both to establish clear mechanisms for the reassignment of staff members facing untenable situations and to improve managerial skills. It called for stronger coordination between regional ombudsmen and WHO’s regional committees.

31. The Committee expressed disappointment at the slow progress of efforts to implement previous recommendations. It advised that the work of the WHO Health Emergencies Programme’s working group on diversity in the workplace should be continued.

32. In response to a question about the increased numbers of visits by staff members, the Ombudsman concluded that the increase was due to better outreach and greater trust among staff members. Good collaboration between senior management and the Ombudsman contributed to the business integrity element of WHO’s activities. Previously identified issues were already being addressed but would need proactive follow-up.

The Committee recommended that the Executive Board note the report; it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) take the actions recommended by the Ombudsman to set WHO on the path to a new corporate culture;

(b) address the root causes of systemic problems and dysfunctional working environments;

(c) design a process for support to and reassignment of staff members in exceptional circumstances and untenable positions, and clarify expectations for the offices affected;

(d) urgently follow up previous recommendations made by the Ombudsman that remain open and report on outcomes to the Executive Board;

(e) provide an update on the outcome of the work of the WHO Health Emergencies Programme’s working group on diversity in the workplace; and

(f) enhance communication between ombudsmen at regional and headquarters levels and encourage regular reporting by regional ombudsmen to the regional committees; and

(g) develop standardized terms of reference for all WHO’s ombudsman positions.

3.4 Amendments to the Staff Regulations and Staff Rules (Documents EB146/49 Rev.1 and EB146/49 Rev.1 Add.1)

33. The Committee received the report on amendments to WHO’s Staff Regulations and Staff Rules. As noted by the Secretariat in the introduction to agenda item 3.1, the amendments reflect the changes to common system salaries recently adopted by the United Nations General Assembly. The Committee asked for a more detailed introduction to the issue in the future. In response to this request, the Secretariat promised to include in future such reports an in-depth introduction as well as an explanation of the specific implications for the Organization.

1 Resolutions 74/255A and 74/255B (2019).
34. The Secretariat stressed that WHO is part of the United Nations common system and that the proposed changes to WHO salaries are made on a “no loss, no gain” basis. The proposed changes in the remuneration of staff in ungraded positions and of the Director-General require the approval of the Health Assembly.

   The Committee recommended that the Executive Board adopt the two draft resolutions contained in document EB146/49 Rev.1.

3.5 Report of the International Civil Service Commission (Document EB146/50)

35. The Committee was requested to note the report of the International Civil Service Commission, for which a brief introduction had been provided by the Secretariat, summarizing resolutions and decisions adopted by the United Nations General Assembly at its seventy-fourth session relating to the work of the Commission. The Committee drew attention to United Nations General Assembly resolutions 74/255A and 74/255B, which reiterated a call to all organizations of the United Nations common system to cooperate with the Commission on matters relating to salaries, allowances and conditions of service. In particular, the General Assembly had noted that not all decisions were applied consistently.

36. The Committee expressed overall support for the Commission’s work and urged the Secretariat to ensure that the Organization’s policies and practice complied with the Commission’s decisions. Although the Committee acknowledged the judgments of the Administrative Tribunal of the International Labour Organization at its 128th session in 2019 concerning the post adjustment multiplier determined by the Commission on the basis of its 2016 cost-of-living survey for Geneva, the Secretariat was urged to implement the recommendations of the Commission in full, in accordance with relevant resolutions of the United Nations General Assembly.

37. The Legal Counsel noted that the Organization had a legal obligation to implement the judgments of the Administrative Tribunal of the International Labour Organization, which it had done, and that WHO is committed to working with others within the United Nations on common system issues.

   The Committee recommended that the Executive Board note the report.

3.6 Programme budget 2020–2021 (Document EB146/28 Rev.1)

38. The Committee received a report on the measurement of the results framework for the Thirteenth General Programme of Work, 2019–2023, which had been developed to align data with delivery of the triple billion targets and health-related Sustainable Development Goals, and to track the progress of WHO’s results. The Secretariat stated, as requested by the Member States and following the presentation at the Seventy-second World Health Assembly in May 2019, that:

   • the framework was systematically reviewed with Member States during all WHO regional committees, and afterwards by a global technical consultation with representatives from health ministries and national statistical organizations from more than 20 countries, experts and staff from all three levels of WHO;

   • feedback and comments received from these consultations were incorporated to further refine the measurement system and document the need to strengthen country data and health information systems;
• the results framework provided a holistic view of WHO’s overall impact. It included three components: the impact measurement, the output scorecard and qualitative country case studies. The impact measurement was based on the Sustainable Development Goals and measures progress at three levels, using:
  – 46 outcome indicators covering a range of health issues (39 relating to the Sustainable Development Goals and 9 to Health Assembly resolutions),
  – three indices to measure each of the triple billion targets, and
  – healthy life expectancy quantifying expected years of life in good health as a measure of the overall health of the population;

• the output scorecard assessed the Secretariat’s contributions (outputs) to the achievement of outcomes and impact. It measured six dimensions of technical support, leadership and normative work. The next steps for the results framework were as follows: for the impact measurement, results of the pilot-testing that is under way would be reviewed and shared before being submitted to the Seventy-third World Health Assembly in 2020; for the output scorecards, the application would be tested in country offices, the leading indicators for the results dimension would be finalized, further pilot-testing would be conducted a decision would be taken on the independent validation mechanism, agreement would be sought on Member States’ involvement, roll-out would be prepared, and the scorecard would be applied with a mid-term review undertaken in 2020 and a report submitted to the Seventy-fourth World Health Assembly in May 2021.

39. The Committee noted the ongoing development of the measurement framework and the inclusion of gender, equity and human rights within the Programme budget 2020–2021 and the output scorecard dimensions. The Committee emphasized that successful implementation would require considerable input of human and financial resources.

40. The Committee expressed appreciation for the alignment of the impact measurement and outcome indicators with those of the Sustainable Development Goals. The Secretariat was urged not to increase the reporting burden on countries. The Committee suggested that, if successful, the measurement of the results framework and particularly the output scorecard could strengthen the accountability of the Secretariat to Member States and could become a model for other United Nations organizations. The Secretariat said that impact measurement could strengthen country capacity to track progress towards the health-related Sustainable Development Goals.

41. Concern was expressed by the Committee at the unavailability of data in many Member States for completion of the impact measurement and related outcome indicators and indices. While Member States were committed to reporting on health-related Sustainable Development Goals, concerns were expressed on standardized reporting in respect of the outcome indicators that countries will select based on their priorities. The methods report for Thirteenth General Programme of Work, 2019–2023, provided details on assessing progress across countries that used different outcome indicators.
The Committee recommended that the Executive Board note the report; it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) maintain a sharp focus on gender, equity and human rights as well as on value for money;
(b) publish data from the United Nations System-wide Action Plan on Gender Equality and the Empowerment of Women;
(c) ensure alignment of results reporting with reporting on the Sustainable Development Goals, and minimize placing an additional reporting burden on countries;
(d) ensure strong involvement of Member States in piloting measurement of the results framework;
(e) increase capacity and alignment for data management at all three levels;
(f) consider providing a stepwise roll-out of the reporting framework; and
(g) upon request, help to strengthen country capacity for data and health information systems and provide timely, reliable and actionable data to drive impact.

3.7 Financing and implementation of the Programme budget 2018–2019 and outlook on financing of the Programme budget 2020–2021 (Documents EB146/29 and EB146/30)

42. The Secretariat provided the Committee with an update using preliminary figures and analyses as at the end of the biennium 2018–2019 for both the financing and implementation status of the Programme budget 2018–2019 and the outlook for the biennium 2020–2021, noting that final figures for 2018–2019 would be submitted to the Seventy-third World Health Assembly in May.

43. The Committee welcomed the report and the updated figures, which showed both improved financing and more equitable financing across categories and major offices, as compared with the corresponding data for 2016–2017. It noted the improvements in the level of earmarking of voluntary contributions.

44. At the same time, the Committee expressed concerns about the prevailing underfunding in certain categories (noncommunicable diseases and the WHO Health Emergencies Programme) and the uneven distribution across major offices.

45. It also highlighted the over-reliance on a small number of major donors and difficulties in ensuring predictable funding. Work needed to continue on enlarging the pool of donors, reducing the level of earmarking, decreasing the number of donor agreements and simplifying reporting requirements.

46. With regard to the Programme budget 2020–2021, the Committee welcomed the re-introduction of the outbreak and crisis response budget segment as well as the shift from disease-specific results to a more integrated framework.

47. The Secretariat informed the Committee that it was working with Member States to ensure greater flexibility of funding in order to implement the Thirteenth General Programme of Work, 2019–2023.
Furthermore, the Committee was informed about WHO’s commitment to implement its value-for-money strategy which would also contribute to efficiencies, including in areas such as procurement and travel.

**Resource mobilization**


49. The Committee, noting that more than half of the current voluntary contributions to the Organization come not from Member States but from other sources, supported a more coordinated and strategic approach to WHO’s financing. The Committee welcomed the proposal to use a centralized resource mobilization mechanism, expand the donor base and increase the proportion of flexible funding; it urged the Secretariat to share more details of plans for the mobilization, allocation and use of funds across the four pillars. There was also a call to strengthen resource mobilization at country levels.

50. The Committee requested further details about the proposed WHO Foundation, including examples of similar foundations related to other parts of the United Nations system, and asked that Member States be kept fully and regularly informed about its development and accountability. It would be necessary to exercise caution in receiving funds from donors, bearing in mind the Framework of Engagement with Non-State Actors. The Committee asked for more information about the options for innovative financing and revenue-producing activities and on the targets and milestones for implementation of the strategy.

51. The Secretariat noted that it had already held one mission briefing on the proposed WHO Foundation and stated that a second briefing would be arranged, with the presence of the Chair-designate of the Foundation, in order to respond to remaining questions. It was pointed out that WHO’s fundraising would be focused not only on headquarters but also on other offices. For instance, some investment entities might not give funds to WHO headquarters but would welcome WHO’s advice on where to invest constructively. Training would be provided to staff at various levels on how to approach specific sources of donations. Several new donors had begun supplying funds to WHO via the emergencies fund. Regarding the role of governing bodies in relation to non-State donors, there had been some discussions and any decisions would be taken with the involvement of Member States.

The Committee recommended that the Executive Board note the two reports. With regard to the financing and implementation of the Programme budget 2020–2021, it further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) work towards a more equitable distribution of flexible funding across categories and major offices;

(b) promote multiannual funding and pooled funding among Member States;

(c) place more focus on underfunded programmes, including those for noncommunicable diseases and health emergencies;
(d) strengthen partnerships between the Secretariat and WHO’s partners in order to address the issue of uneven funding of areas and categories;

(e) include information on progress towards targets, including the efficiency target, in future reporting; and

(f) include regular status updates on implementation of the United Nations Funding Compact in reporting to the Health Assembly.

With regard to the WHO resource mobilization strategy, the Committee proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) strengthen and expand resource mobilization activities at regional and country levels, providing adequate and targeted resources through collaboration with Member States and in line with country support plans;

(b) supply further information on proposals for resource mobilization, including innovative financing and revenue-producing activities, in future updates to Member States;

(c) in order to take a decision on the establishment of a WHO foundation, engage in timely and thorough consultations with Member States on this proposal, prior to the governing body meetings in May 2020, and provide sufficient information on the foundation, including its nature, its eventual relationship with WHO, and measures to advance the interests of WHO and safeguard the Organization’s reputation;

(d) link the new centralized strategic approach to the One-United Nations approach;

(e) apply as appropriate the Framework of Engagement with Non-State Actors with regard to resource mobilization;

(f) work with Member States and donors to provide more predictable and flexible funding;

(g) continue its work towards the expansion and diversification of the pool of donors;

(h) report on key milestones and targets of the new strategy to the Executive Board through the Programme, Budget and Administration Committee;

(i) explore ways for holding a structured and transparent dialogue with major donors to close the funding gap;

(j) undertake strategic scenario planning, as recommended by the Independent Expert Oversight Advisory Committee; and

(k) develop a balanced narrative for communication with donors, including ensuring a consistent understanding of strategic resource mobilization by Secretariat staff members, in full alignment with the priorities set out by Member States.
3.9 Engagement with non-State actors (Documents EB146/34, EB146/35, EB146/35 Add.1 and EB146/38 Add.2)

52. The Secretariat introduced the reports and informed the Committee that a full management response to the initial evaluation of the Framework of Engagement with Non-State Actors, contained in document EB146/38 Add.2, would be made available following consultation across the three levels of the Organization. It should be noted that the evaluation was not an evaluation of the Framework, but of its implementation. It was a forward-looking evaluation, which listed gaps in implementation and challenges, but took them as lessons learned that could promote improvements in implementation in the future.

53. The Committee welcomed the reports and supported all six recommendations set out in paragraphs 42 to 47 of the evaluation. It noted the unique nature of the Framework as the only instrument designed to organize interaction with non-State actors in the United Nations system. The Committee commended the Secretariat for its efforts in implementing the Framework in the face of the challenges identified in the evaluation.

54. The Committee further noted that implementation of the Framework was taking place during a period of very considerable change in WHO under the transformation agenda. In that connection, it appreciated the efforts made by WHO staff in carrying through the implementation but expressed concerns that those efforts might give rise to change fatigue. The Committee requested further information concerning the secondment numbers and nil-remuneration contracts at WHO in relation to non-State actors.

55. The Committee expressed concern at the lack of an overarching engagement strategy and stressed the importance of enhancing communication on the Framework both internally and externally. It urged the Secretariat to ensure sufficient funding for implementation. The Committee also called on the Secretariat to maintain due diligence but to avoid a risk-adverse attitude when engaging with non-State actors, as it recognized the benefit that interaction with non-State actors in health could bring to WHO. It expressed appreciation for the WHO Register of non-State actors but felt that more information should be given in the Register and that it should be made more accessible to users. The Committee requested to be kept informed on progress in implementation of the Framework.

56. In response to questions from the Committee, the Secretariat explained that in order to ensure a consistent approach across the Organization, specific guidance on the management of nil-remuneration contracts in the context of the Framework of Engagement with Non-State Actors would be included in the updated policy on consultant contracts that was due to be issued later in the year. The policy would include the due diligence process for third party involvement and payment.

57. The Chair informed the Committee that in addition to the change in the name of a non-State actor mentioned in paragraph 20 of document EB146/35, IOGT International was now known as “Movendi International”. Both entities had communicated the necessary proof and documentation supporting those changes, and the Secretariat would change the names in its records. There were no other changes to the entities.

The Committee recommended that the Executive Board note the reports contained in documents EB146/34, EB146/35, EB146/35 Add.1 and EB146/38 Add.2 and adopt the draft decision contained in paragraph 21 of document EB146/35. The Committee further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:
(a) take measures to strengthen the implementation of the Framework of Engagement with Non-State Actors in full transparency;

(b) proceed promptly to implement the recommendations contained in paragraphs 42 to 47 of document EB146/38 Add.2, paying particular attention to recommendations 1, 4 and 6;

(c) ensure that best practices on implementation of the Framework are disseminated and shared with the regional and country offices;

(d) provide adequate training on implementing the Framework to staff at all three levels of the Organization;

(e) allocate sufficient funds for implementation of the Framework at all three levels of the Organization;

(f) enhance the range and quality of information available in the WHO Register of non-State actors, and enhance its usability;

(g) present a full management response to the evaluation, and report regularly to the Executive Board through the Programme, Budget and Administration Committee on progress in implementation of the Framework; and

(h) implement the recommendations of the Independent Expert Oversight Advisory Committee as outlined in paragraph 35 of document EBPBAC31/2.

3.10 Evaluation: update and proposed workplan for 2020–2021 (Documents EB146/38 and EB146/38 Add.1)

58. The Committee received an introduction to document EB146/38, which covered progress made in implementing the evaluation workplan 2018–2019 and the proposed workplan for 2020–2021. It was proposed that consideration of the review of 40 years of primary health care implementation at country level (contained in document EB146/38 Add.1) be considered more fully by the Executive Board at its 146th session.

59. The Committee welcomed the reports, commended the work of the Evaluation Office, including its engagement in interagency work, and expressed support for the workplan for evaluations in 2020–2021. That workplan was ambitious but should provide a useful measure of impact at country level. In particular, the Committee welcomed the proposed evaluations of the implementation of the global action plan on antimicrobial resistance, the emergency and review committees under the International Health Regulations (2005) and the HIV/AIDS framework for action in the African Region, 2016–2020. Two further evaluations were proposed, looking at the use of consultants and Agreements for Performance of Work; and the mainstreaming of gender, equity and human rights in the Secretariat’s work. The Committee was keenly awaiting the conclusions of evaluations undertaken through the workplan for 2018–2019 and urged systematic implementation of the recommendations issuing from the evaluations. The Secretariat confirmed that the report of the evaluation on WHO collaborating centres was being finalized, while the report on the evaluation of IARC had been submitted to the Scientific Committee and would be considered by the agency’s Governing Council in May 2020.
60. The Committee looked forward to the completion of and reports on the evaluations of the work of WHO collaborating centres and of WHO’s normative function at country level. It also requested the Executive Board’s engagement in the evaluation of the transformation agenda.

61. The Committee recognized that the work on evaluation, including the carrying-over of some evaluations to the biennium 2020–2021, would need adequate resources for the Evaluation Office. It noted that some additional staffing had already been provided. No budget for the 2020–2021 workplan had been provided to date, as it was expected that the Committee would want to add further evaluations, while the continuing “best-in-class” study might provide additional guidance on budget and capacity for the evaluation function. The Secretariat also provided clarification on the justification for the evaluations proposed.

62. In response to a request for annual consolidation of recommendations from evaluations, the Committee was informed that full details would be included in documents to be provided at its May session and that all data, including the management responses to the evaluations, would be in the public domain on WHO’s website.

63. The Secretariat clarified that the decentralized evaluation of the Inter-Agency Standing Committee Global Health Cluster would be commissioned and managed by the WHO Health Emergencies Programme with technical back-stopping and quality assurance provided by the Evaluation Office.

The Committee recommended that the Executive Board note the reports and approve the Organization-wide evaluation workplan for 2020–2021 contained in document EB146/38, but with the inclusion of two further evaluations in that workplan: (i) on the increasing use of consultants and Agreements for Performance of Work by the Organization, and (ii) on the integration of gender, equity and human rights in the work of the Organization. The Committee further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) provide adequate funding to the Evaluation Office so that it can implement the Organization-wide evaluation workplan for 2020–2021;

(b) promote a culture of evaluation throughout the Organization at all three levels; and

(c) involve Member States in the evaluation of the implementation of the transformation agenda.

3.11 Update on the Infrastructure Fund (Documents EB146/40, EB146/41 and EB146/41 Add.1)

Information management and technology

64. The Committee expressed its appreciation of the Organization’s strategy on information management and technology that had been revised to reflect an increased emphasis on digital transformation, cybersecurity, data and analytics, and improved governance and processes.
65. The Committee welcomed the work on increasing the use of cloud technology and strengthening cybersecurity. The Committee urged the Secretariat to ensure that the new digital platform would be accessible to Member States and that countries with limited digital resources would be supported, including with training and resources, to take advantage of the secure cloud-based system.

66. The Secretariat explained that the integrated digital platform to support emergencies was being piloted by the emergencies team in WHO and had already undergone some testing by the team in the Democratic Republic of the Congo.

67. Regarding work on improving cybersecurity, the Secretariat stated that its current actions included large-scale staff training in phishing. The Organization had established a dedicated cybersecurity team and was also collaborating with other United Nations organizations, such as WIPO to implement a variety of cybersecurity measures in line with the security assessments and audit recommendations.

**Geneva buildings renovation strategy**

68. The Committee received a report on the planned renovation of the main WHO headquarters building and the construction of a new building on the WHO campus. The Committee welcomed the report and requested an update on costs and timing as well as on the role of the Member State advisory board. The Secretariat confirmed that the project was on time and within the budget initially indicated. In addition, it noted that the cost of the heating and cooling system was adequately covered by the initial loan by the Host Country and would not require any additional budget or financing.

69. With regard to the Member State advisory board, the Secretariat confirmed that it had met three times during 2019.

70. As the new building was planned for completion in 2020, the Secretariat agreed to provide a report on the project to the Executive Board and the Health Assembly in 2021, rather than in 2022 as originally proposed.

71. The Secretariat reported that the finished project could provide capacity for some 2800 desk spaces. During the renovation of the main building that would follow the construction of the new one, temporary office space would be organized.

The Committee recommended that the Executive Board note the report contained in document EB146/40 and consider the decision contained in document EB146/41. The Committee further proposed, as guidance for the Secretariat’s implementation of existing mandates, that the Secretariat:

(a) continue its development of cloud-based technology;

(b) ensure that the cloud-based technology was fit for purpose at all levels of the Organization;

(c) continue to focus on information technology needs and impact at country level;

(d) continue to monitor the costs and timing of the construction project; and

(e) report to the Executive Board and the Health Assembly in 2021 on progress made in the renovation project.
Agenda item 4  Adoption of the report and closure of the meeting

72. The Committee adopted its report.