Management reforms: review of progress

Report by the Secretariat

1. This document summarizes progress made since the report to the ninth meeting of the Committee.\(^1\) It focuses mainly on the renewal of the monitoring and assessment framework, on WHO’s new enterprise resource planning system, the global management system and risk management.

RENEWAL OF THE MONITORING AND ASSESSMENT FRAMEWORK

2. In January 2008, an overview of WHO’s performance monitoring and assessment framework was considered by the Committee.\(^2\) While the general direction of the reforms was appreciated, timely consideration of the reports by the Health Assembly was emphasized. In January 2009, the Committee endorsed the proposal to change the timing and format of the reports on monitoring and assessment.\(^3\) The report on the first year of a biennium (the mid-term review) will now be presented to the Health Assembly in May of the second year, and that for the biennium as a whole (the programme budget performance assessment) will be presented in the first year of the next biennium.

3. The Secretariat also committed itself to submitting for the Programme, Budget and Administration Committee’s consideration proposals on conducting an Organization-wide assessment of the Medium-term strategic plan 2008–2013 and monitoring the Eleventh General Programme of Work, 2006–2015.

4. It is proposed that the Medium-term strategic plan will be monitored through three consecutive performance assessments of programme budgets. Previous assessments have focused mainly on attainment of target values for indicators related to the Organization-wide expected results, which are the manageable interest of the Secretariat. It is proposed that, as part of the assessment for the financial period 2010–2011, data on the strategic objectives’ indicators will also be collected in order to establish the extent of progress towards the overall targets of the strategic objectives.

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\(^1\) Document EBPBAC9/2.
\(^2\) Document EBPBAC7/4.
\(^3\) Document EB124/3.
5. A central aspect of this review will be the extent to which data on the strategic objectives’ indicators can be collected through existing health metrics that are already monitored. As the strategic objectives by definition reflect the achievements of Member States, it is proposed that Member States be involved in the process of analysing progress and achievements. It is important that such an exercise of evaluating the high level (strategic objective) indicators does not duplicate other reviews that are mandated through specific Health Assembly resolutions or are part of the global endeavours such as monitoring of the Millennium Development Goals. At the end of the six-year period covered by the current Medium-term strategic plan it is proposed to assess the extent to which strategic objectives have been achieved.

6. As regards assessing the progress in implementing the Eleventh General Programme of Work, 2006–2015, it is proposed to review the quality and balance of the Organization’s work through monitoring WHO’s core functions and to use the results for high-level organizational guidance. The work of the Organization will be categorized and analysed with respect to the six core functions. A summary breakdown of work by core function will be presented as part of the programme budget performance assessment. The analysis will take as point of departure the outputs described in workplans. Selected technical areas and one regional office have begun such a process and a full Organization-wide dataset is expected to be available as part of the 2010–2011 assessment.

Global Management System update

7. In the three months since the Programme, Budget and Administration Committee noted the report on the subject at its ninth meeting, progress has been made in stabilizing the System. Major challenges nevertheless remain. Programming errors are still being identified and are dealt with in a structured manner. Corrections and enhancements follow a clear prioritization procedure. Randomly occurring mistakes in the System are dealt with case by case. The goal is to have a stable system by the third quarter of this year. Additional training is planned in order to improve the ability of staff members to fulfil their new roles and responsibilities within the stabilized system.

8. Clear criteria have been developed to guide further regional introduction of the System. These include absence of major system errors, processing by the Global Service Centre of transactions in accordance with service-level agreements, and meeting standards for time of response to service requests raised by users. Furthermore, a set of criteria has been produced for the regions to implement the Global Management System, especially in terms of data readiness and training of staff. Currently, it is planned to introduce the System in the Eastern Mediterranean, European and South-East Asian regions on 1 January 2010 and in the African Region later that year. The possibility of introducing certain functions (e.g. payment of short-term staff) before full implementation of the System in those regions is being studied. It is expected that operational planning for 2010–2011 will be done using the System.

1 In summary: providing leadership on matters critical to health, shaping the research agenda, setting norms and standards, articulating policy options, providing technical support and monitoring the health situation.

2 Document EB124/3.
Risk management

9. At the ninth meeting of the Programme, Budget and Administration Committee questions were raised about risk management in the General Management cluster. The Secretariat has recently commissioned an external consultant to undertake a study on risk management, covering taxonomy and a risk management framework that includes structures, processes and resources needed as well as risk mitigation strategies. The study involves all senior managers in the cluster. The results should be available shortly, and will be used in establishing appropriate procedures for risk management.

ACTION BY THE PROGRAMME, BUDGET AND ADMINISTRATION COMMITTEE

10. The Committee is invited to note this report.