



70th session of the WHO Regional Committee for Europe  
(Copenhagen, Denmark, virtual session 14–15 September 2020)

## Synthesis report on the outcomes of the regional committees to be submitted to the Executive Board at its 148th session

Summary report from the Chairman,  
Dr Alexey Tsoy, Minister for Health, Kazakhstan

### INTRODUCTION

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The 70th session of the WHO Regional Committee for Europe (RC70) was held as a virtual, *de minimis* session on 14 and 15 September 2020. **Special rules and procedures** were adopted to accommodate the virtual format of the session, supplementing the Rules of Procedure where needed. They applied to the agenda (limited to items essential for governance continuity and strategic orientation); attendance (representatives of non-State actors could not speak); interventions (live or pre-recorded video statements and written statements); and decision-making (consensus where possible, otherwise by roll call or postal secret ballot after the session for nominations and elections).

### PART 1: TOPICS FOR GLOBAL DISCUSSION

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**WHO transformation:** The Committee considered that the global document on transformation for enhanced country impact would benefit from a more detailed account of the findings of country reviews, and requested additional information on concrete solutions to the mismatch of resources and staffing; greater transparency in the presentation of progress made in the delivery of the transformation agenda; and a more comprehensive portrayal of the situation on the ground. While the COVID-19 pandemic would necessarily have an impact on the transformation process, a cycle of constant reform should be avoided.

The Regional Committee supported the Regional Office's commitment to the process of transformation and the strong focus on country impact, while calling for further discussion on modalities for cooperation with countries without country offices. The new draft high-level organigram for the Regional Office aligns the organizational structure with the strategic priorities of the European Programme of Work, 2020–2025 – “United Action for Better Health in Europe” (EPW), and the Thirteenth General Programme of Work, 2019–2023 (GPW 13).

**Development of a draft global patient safety action plan:** The Regional Committee noted that through resolution WHA72.6, the World Health Assembly had called for the elaboration of a global patient safety action plan and that 17 September would be marked as annual World Patient Safety Day, with the aim of building partnerships and promoting all aspects of

patient safety. In 2020, the Day would focus on health worker safety, with emphasis on the interdependence between the safety of health workers and that of patients, particularly in light of the COVID-19 pandemic, and a call to action to prioritize the physical and psychological well-being of health workers.

**Development of the programme budget 2022–2023:** The Regional Committee expressed disappointment that it had not received a full draft of the Proposed programme budget (PPB). Ample time and detailed information should be provided for consultations with Member States before the PPB was submitted to the Executive Board in January 2021. Member States should be fully informed about costed activities, including those that had not been included in the Programme budget 2020–2021. The lessons learned from the COVID-19 pandemic should inform the PPB and planning for the long-term implementation of GPW 13, taking into account the future recommendations of the Independent Panel for Pandemic Preparedness and Response. Some representatives supported the proposal to extend the implementation of GPW13 to 2025, but others asked for more time to consider the implications of the proposal, including the potential impact on regional planning and measurement of results.

## **PART 2: TOPICS OF REGIONAL SIGNIFICANCE**

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In the context of the **COVID-19 pandemic** the Regional Committee expressed great appreciation for the technical support from WHO across the Region and considered that a strong and effective WHO was more essential now than ever before and that WHO had to be at the forefront of efforts to ensure that health was central to decision-making in all sectors and was acknowledged as being central to Member States' economic and social well-being. Representatives referred to the SDGs as a comprehensive and powerful tool for crisis management and proposed promoting a stronger role for health in the overarching development goals at the global level. Any steps to contain the spread of the infection must be taken in the context of striving for universal health coverage, with a focus on primary care and access to contact tracing, testing and treatment, free of charge. The crisis had given rise to rapid innovation and the development of new technologies, which must remain available to benefit health systems after the pandemic ended. Health systems must be strengthened and sufficiently funded; the health workforce must be protected. Cooperation and partnerships within and between countries as well as sharing knowledge and building capacity were considered crucial to prevent further peaks in the spread of the virus, and in particular for the development of vaccines and effective medicines. The overwhelming economic impact of the pandemic demonstrated the need for a transition to an economy of well-being. The establishment of the Pan-European Commission on Health and Sustainable Development was, therefore, particularly welcome, and its conclusions and recommendations, along with the results of the evaluation to be conducted by the Independent Panel for Pandemic Preparedness and Response (IPPR), were eagerly awaited.

The Regional Committee adopted by consensus the **European Programme of Work, 2020–2025 – “United Action for Better Health in Europe” (EPW)**<sup>1</sup> and expressed broad support with the vision it embodied, including its three overarching priorities (moving towards universal health coverage; protecting against health emergencies; promoting health and

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<sup>1</sup> Resolution EUR/RC70/R3.

well-being) and four flagship initiatives (mental health coalition; empowerment through digital health; the European immunization agenda 2030; and healthier behaviour through incorporating behavioural and cultural insights), which were aligning well with national health goals in many Member States. It welcomed the approach whereby the core priorities were based on the legitimate expectations of citizens with regard to their health authorities, placing people squarely at the centre and commended the close alignment with GPW 13 and the linkages to the SDGs as well as the EPW's strong focus on maximizing country impact, noting that the new resource mobilization strategy should be implemented with that goal in mind. The Regional Committee also welcomed the fact that the EPW had taken account of the early lessons learned from the COVID-19 pandemic, which had shown the importance of strong, resilient and well-structured health systems, an adequate, well-resourced health workforce and access to high-quality care and medicines. In that context it concurred on the need to ensure continuity of other essential services and to keep sight of existing health challenges, such as combating inequalities and improving health literacy, as well as continuing to address noncommunicable diseases, antimicrobial resistance, ageing, dementia and tobacco use. Given growing global interdependence, the Regional Committee welcomed the emphasis in the EPW on collaboration with relevant European actors (including the partnership with European Commission) and considered that an agile, proactive and responsive Regional Office would be a vital tool for regenerating the work of WHO in the Region.

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