

## Opening Session

Decision Point: 22-1:

The Board:

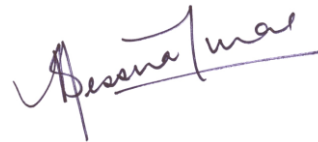
1. Endorsed Dr Amy Bloom, USAID as the Interim Chair
2. Adopted the proposed agenda for the 22<sup>nd</sup> Stop TB Partnership Coordinating Board meeting.
3. Thanked the outgoing Chair, Professor Rifat Atun for his dedication and leadership of the Coordinating Board from 2010 to 2012.

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Blessina Kumar  
Vice-Chair

## Report of the Executive Secretary

Decision Point: 22-2:

The Board:

1. Welcomed the report of the Executive Secretary and congratulated on the achievements over the past ten months.

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Blessina Kumar  
Vice-Chair

## Stop TB Partnership Strategic Operational Plan

### Decision Point: 22-3:

The Board refers to its decision (1.12 – 7.0) to develop a three-year Operational Strategy.

The Board:

1. Approves the Partnership Secretariat's three-year Operational Strategy and affirms its aim to prioritize and refocus its activities;
2. Requests the Secretariat to communicate its strategy to the entire Partnership and to accelerate implementation of activities.
3. Requests the Executive Committee to:
  - a. Oversee the implementation of the strategy
  - b. Review and decide on any appropriate changes that may be required to the budget and work-plan based on lessons learned from implementation.
  - c. Provide the board with a progress update on the implementation of the Operational Strategy at the next board meeting and electronically should any changes to budget and work plan be required

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Blessina Kumar  
Vice-Chair

## Realignment of the Partnership Secretariat


### Decision Point: 22-4:

1. Recognizing the financial constraints of the Partnership and the prioritization of activities set forth in the Operational Strategy, the Board endorses a streamlined organigram for the Partnership Secretariat. [REDACTED]
2. The Board requests the Executive Committee to prioritize fundraising to cover the current the USD 270,000 projected deficit for 2013 or to make further efficiencies in other costs. The Executive Committee should also prioritize securing 2014 contributions from donors by, at minimum, ensuring the 2013 bilateral donors provide commitments for 2014
3. The Board recognizes that the Partnership is subject to the rules and regulations of the host organization, and requests the Executive Secretary, Executive Committee, and the host organization (WHO) to explore all possibilities to minimize operational and reputational risks that may arise as a result of the restructuring.
4. Therefore, the Board requests flexibilities from the host organization, WHO, for the Stop TB Partnership to reorganize itself in line with the board approved structure as quickly as possible but no later than March 2013. These flexibilities include:
  - a. To recognize the Stop TB Partnership Board approved organigram as the approved structure of the Secretariat
  - b. To provide flexibilities in the approach to restructuring in order to minimize disruption to the Partnership. [REDACTED]  
[REDACTED], this flexibility could include a principle that positions, which are not changing and are already filled by staff, are not opened for competition.
  - c. To maintain the current balance of short-term and fixed term staff and not change any current short-term positions into fixed term positions. Additionally, the three new positions, which are being introduced, should also be short-term. This reduces liability to both the Partnership and the host organization.
5. The execution of this decision point will be reviewed based on the availability of funds to meet the financial implications.

Date: 17 November 2012



Dr. Lucica Ditiu  
Executive Secretary



Blessina Kumar  
Vice-Chair

## Stop TB Partnership Financial Reserves

Decision Point: 22-5:

The Secretariat currently has USD 4.5 million in its reserves. The Board recommends the following guidelines to determine how the reserves may be spent:


1. The Secretariat must always maintain enough in cash reserves to cover indemnities for all staff in the event of the dissolution of the Partnership. This is critical to protecting the potential risks and liabilities for the Partnership and the host organization.
2. The current amount available for reserves should only be used for the following purposes:
  - a. Maintaining enough to cover indemnities for all staff in 2013 and 2014.
  - b. Paying out the potential indemnities in 2013 for abolishing posts as part of the proposed reprofiling exercise.
  - c. Maintaining the remaining USD 1.4 million in reserves for 2014 planned costs (human resources/activity) should no additional donor commitments be signed.
3. The reserves should not be used to pay for staff costs associated with proposed abolished positions as these positions are being cut to align the organization with the priorities in the Operational Strategy. These positions may only be reconsidered by the Board should a donor provide funding to cover both staff costs and the activity costs associated with these roles.
4. Only the Board, through consideration and decision by the Executive Committee, may authorize using reserves for any other purpose than those outlined above.

Date: 17 November 2012



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Executive Secretary



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Blessina Kumar  
Vice-Chair

## Stop TB Partnership Governance Reform

### Decision Point: 22-6:

The Board notes that:

- A. At its 21<sup>st</sup> meeting in January 2012 in Bangkok, Thailand, the Board held a governance retreat at which board members identified challenges to its effectiveness and its impact on TB and the Global Plan goals.
- B. To address these challenges, the Board made a decision (1.12-7.0) to comprehensively review its governance structure with the goal of streamlining the board size and strengthening its constituency based board.
- C. A Steering Committee comprised of the Executive Committee and sub-Committee on Governance, Performance and Finance was formed to oversee the implementation of this decision. The recommendations put forward are a result of extensive analysis and discussion amongst this group and are informed by the perspectives of board stakeholders.

To improve its efficiency and effectiveness and to achieve greater impact in the prevention and control of TB, the Stop TB Partnership Board approves in principle the recommendations of the Steering Committee and decides the following:

1. The Stop TB Partnership Board has a responsibility: a) to the global TB community to build awareness, facilitate consensus on strategy, and identify key strategic issues affecting TB; and b) to the Secretariat to provide oversight and guidance and to set strategic direction and approve budgets.
2. To fulfill this role, the Partnership Board will be represented by no more than 29 members, representing a mix of rotating and fixed voting seats and non-voting seats. The Board will be based on the following composition:
  - a. Nine fixed voting seats – includes 3 donors (USAID, CIDA, Netherlands/UK), 1 foundation (BMGF), 2 technical agency seats (to be rotated between three founding technical agency members – KNCV, the Union, CDC), and 3 multilateral agencies (WHO, Global Fund, World Bank).
  - b. Between 14-16 rotating seats – includes 6 countries, 1 northern NGO, 1 southern NGO, 2 communities, 2 Working Groups, 1 private sector, 1 multilateral, and 2 open seats to be filled strategically for new partners or donors.
  - c. Three Non-voting seats- includes the Board Chair, Board Vice-Chair, and UNITAID.
3. The Stop TB Partnership Board will be supported by an Executive Committee of up to 8 voting members and a Finance Committee of up to 4 voting members.
4. To implement these governance changes, the Board requests the interim Board Chair, Dr. Amy Bloom of USAID, supported by the Executive Committee which developed these recommendations, to oversee the transition process to a new governance model by no later than July 2013.
5. The Board decides on the composition of the Executive Committee as follows:
  - a. Board Interim Chair: Amy Bloom


- b. Vice Chair: Blessi Kumar
  - c. USAID: Cheri Vincent
  - d. CIDA: Nathalie Garon
  - e. Technical agency: Nevin Wilson
  - f. Communities: Carol Nyirenda
  - g. BMGF: Michael Kimerling
  - h. WHO: Mario Raviglione.
6. The Board requests that the Executive Committee prioritize developing criteria to fill the two flexible seats so that the process may be launched as quickly possible.
  7. The Board delegates authority to the Executive Committee to review and decide on changes to the Board's By-Laws and Operating Procedures to include:
    - a. Terms of Reference for Executive Committee and Finance committee and guidelines on other board structures (e.g. task-forces).
    - b. Constituency guidelines for board member selection.
    - c. Selection processes for non-constituency seats.
    - d. Terms of Reference for Board Chair, Vice-Chair, Committee Chairs, and Board Members.
    - e. Protocols to strengthen communication between Working Groups and the Board.
    - f. Nomination and selection process for Board Chair and Vice-Chair.
  8. The Executive Committee will recommend to the Board a proposal for the interactions and decision-making authorities between the Board, Executive Committee, Finance Committee, Secretariat and Working Groups by end of February 2013 in order for a board decision to take place electronically in March - April 2013.
  9. The Board commits to review the governance changes one year from implementation, no later than July 2014, to determine how effective the transition has been and make any required modifications.

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Blessina Kumar  
Vice-Chair

## Zero Declaration

Decision Point: 22-7:

The Board:

1. Strongly endorses the Zero Initiative and Campaign.
2. Encourages partners to work through Ministers and other stakeholders on the Board to support the Zero Initiative and to craft a resolution for the next WHA (May 2013/14) and beyond.

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Dr. Amy Bloom  
Interim Chair



## Hosting Arrangements

Decision Point: 22-8:

The Board:

1. Requests the analysis and findings on the hosting arrangements be presented and discussed at its next meeting.

Date: 17 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## Stop TB Partnership Working Groups

### Decision Point: 22-9:

1. The Working Groups are Partnership created mechanisms, which have served as critical convening bodies for partners to coordinate and harmonize activities towards the achievement of the Global Plan and to execute tasks that require collective effort.
2. Recognizing the significant financial constrains facing Working Groups as currently constructed for 2013-2014, the Board requests the Executive Committee to review:
  - a. The objectives, priorities and functions of the Working Groups for the next three years and how they contribute towards the achievement of Global Plan implementation and research goals.
  - b. The structure and number of Working Groups to deliver the priorities of the Partnership.
  - c. The available financial resources to Working Groups (provided both through the Partnership and from other sources directly to Working Groups themselves).
3. The Board requests the Working Group Chairs to provide the following to the Executive Committee:
  - a. Objectives and priorities for the next three years toward the achievement of Global Plan targets.
  - b. The available funds for 2013-2014 from all sources.
  - c. Financing scenarios which include the minimum amount required to function.

The Secretariat will develop a common template for Working Groups to submit this information and collate the information for the Executive Committee's consideration.

The Executive Committee shall receive this data in January 2013 and decide on how the resources available in the Partnership Secretariat budget should be allocated and identifying where additional resource mobilization efforts will be required.

4. The Executive Committee shall make a recommendation on the strategy guiding the number and focus of Working Groups including priorities, deliverables, and financing for the next three years for consideration at the next board meeting.

A core principle of this recommendation will be aligning the structure and expectations of Working Groups with resources currently available, while making clear the additional impact that could be achieve if additional funding is made available to working groups by donors.

Date: 18 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## TB REACH

Decision Point: 22-10:

The Board:

1. Endorses the recommendations of the TB REACH Proposal Review Committee and requests the Secretariat proceed with the necessary steps for signing grant agreements with the successful grantees.

Date: 18 November 2012



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Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## Global Drug Facility

Decision Point: 22-11:

The Board:

1. The Board endorses the new strategic direction including strategic revolving stockpile and flexible funding mechanisms and urges the Secretariat to start mobilizing resources and taking initial steps towards implementing it as soon as possible.
2. The Board requests The Global Fund to Fight AIDS, TB and Malaria - during their reform processes - to support the two initiatives proposed - i.e new grant management process, pooled procurement and the emergency commodity support.
3. The Board requests UNITAID to extend the existing Strategic Rotating Stockpile (at no cost) by at least one year, but ideally for a longer period – contingent on complementary support from the Global Fund.
4. Considering the specific nature of GDF and funding, the Coordinating Board requests that the restructuring and re-profiling of GDF is considered and conducted separately from the rest of the Stop TB Partnership Secretariat.
5. The Coordinating Board requests that at its next meeting a discussion on engagement of the GDF with partners on the broader market dynamic drivers.

Date: 18 November 2012



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Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## TB Global Epidemic

Decision Point: 22-12:

1. While progress has been made in a number of areas, we are concerned that we are not on track to achieve the 2015 mortality target in some regions, several Global Plan targets, and that the African and European regions are facing the greatest challenges in advancing TB control.
2. The next three years are an essential period where we need to focus on accomplishing what needs to get done to achieve these implementation targets so we are prepared to transition to a new set of ambitious goals in 2015.
3. Our focus should be on:
  - a. Expanding access to diagnosis for susceptible and resistant TB and TB/HIV;
  - b. Closing the 3 million gap in case detection with the latest and most accurate diagnostics and the services/system innovations being studied in several settings with a special focus on civil society, communities and private sector providers involvement;
  - c. Ensuring adequate quality assured supply chain for drugs and commodities for susceptible and resistant TB and TB/HIV;
  - d. Expanding access to treatment and supportive services to ensure treatment completion for susceptible and resistant TB and TB/HIV including latent TB Infection in specific populations.
4. The Partnership requires a plan for how it will achieve these goals and requests the Executive Secretary to lead the process to develop this plan in consultation with WHO, UNAIDS, The Global Fund to Fight AIDS, TB and Malaria, the Working Groups and partners. This plan should identify what needs to get done, who will do it, and what resources are required. This will ensure the Partnership is focused on the achievement of the 2015 goals so that it is ready to transition to a new set of more ambitious goals.

Date: 18 November 2012



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Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## Ensuring TB is on the post 2015 SDG Agenda

Decision Point: 22-13:

1. The Board acknowledges the urgency and importance of a joint strategic approach to address critical need to clearly position TB in the post 2015 development agenda.
2. The Board requests the Secretariat to develop a short messaging platform around the value of health and TB in the post 2015 development goals.
3. The Board requests WHO and the Secretariat to track the process of developing the goals and communicate with partners about the process highlighting opportunities for partners to engage, as possible. The Partners commits to support this effort by engaging in targeted advocacy efforts.

Date: 18 November 2012



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Dr. Lucica Ditiu  
Executive Secretary



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Dr. Amy Bloom  
Interim Chair

## Closing Session

### Decision Point: 22-14:

The Board:

1. Endorsed the action points from the last Coordinating Board meeting on 30 January – 1 February 2012 in Bangkok, Thailand.
2. Requests the Secretariat respond to the letter from Gulf Cooperation Council (GCC) and asks the Executive Committee to examine further the issues raised;
3. Acknowledges the Kuala Lumpur Zero Declaration;
4. Urges that for the next Coordinating Board meeting all documents are ready and shared two weeks in advance;
5. Requests the Secretariat to explore holding the next board meeting in the 2<sup>nd</sup> week of July 2013.
6. Decided the most important criteria for determining the location of the next Coordinating Board meeting should be financial cost.

Date: 18 November 2012



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Executive Secretary



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Dr. Amy Bloom  
Interim Chair