

Opening Session

Decision Point 28-1

1. The Board adopts the proposed agenda for the 28th Stop TB Partnership Coordinating Board meeting.
2. The Board notes the progress on addressing the decision points from the 27th Stop TB Partnership Coordinating Board meeting.



Dr Lucica Ditiu
Executive Director



Dr Joanne Carter
Vice-Chair

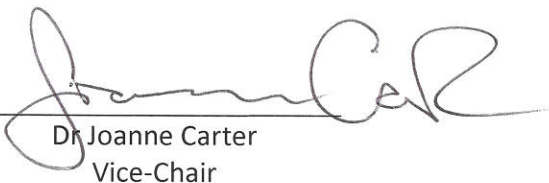
Report of the Executive Director

Decision Point 28-2

1. The Board welcomes the report of the Executive Director and thanks the Executive Director and the Secretariat team for their significant work and achievements.
2. The Board thanks UNOPS for their support and continued engagement.
3. The Board congratulates the Stop TB Partnership for the work done to ensure a much higher profile of TB on the global and public health agenda.



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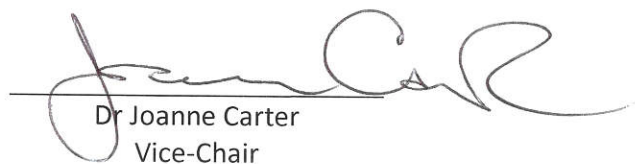
UN High Level Meeting on Tuberculosis

Decision Point 28-3

1. The Board strongly supports the proposal from the Chair of the Board for a United Nations High Level Meeting on TB to be held in 2017 or 2018. The Board is committed to support and advocate to ensure this is a success.
2. The Board thanks Her Excellency, Ms. Aisha Muhammadu Buhari, Wife of the President of the Federal Republic of Nigeria for her commitment to raise the political profile of TB.



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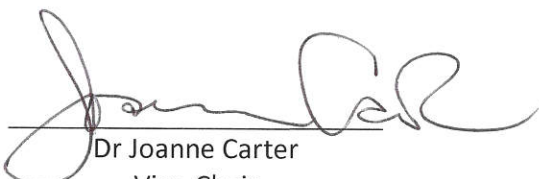
TB REACH

Decision Point 28-4

1. The Board recognizes the leadership demonstrated by the Government of Canada in supporting innovation and acceleration in reaching the unreached and improving treatment outcomes, and applauds the Government of Canada for their funding commitment announced in May 2016 of CAD 85 million for TB REACH for 2016-2021.
2. The Board thanks the Indonesia Health Fund and the Bill and Melinda Gates Foundation for the contribution to TB REACH.
3. The Board commends TB REACH for rapid and effective initiation of a Wave 5 call for proposals and selection process of Wave 5 grantees.
4. The Board recognizes and encourages the effort that will be required from the Secretariat to ensure that it can demonstrate strong, evidence-based results with the new rounds of TB REACH.
5. The Board notes the significant interest that the TB REACH call for proposals received with Wave 5 letters of intent of more than USD 260 million, looks forward to the Proposal Review Committee's funding recommendations, and acknowledges the significant need for funding for innovative TB approaches at country level that this demonstrates.
6. The Board recommends that TB REACH continue to work intensively with national governments, the Global Fund and other donors to ensure that successful approaches identified through TB REACH investments are sustained and linked to the funding needed to achieve dramatic scale-up.



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Anti Microbial Resistance (AMR)

Decision Point 28-5

1. The Board commends the UK Review on AMR and congratulates personally Lord Jim O'Neill and the Review on their outstanding work to mobilize the world to take action on the critical issue of growing antimicrobial resistance including drug-resistant TB.
2. The Board calls on UN member states to endorse an ambitious and action-based Political Declaration during the UN High-Level Meeting on AMR taking place on 21st September 2016. The Declaration should recognize MDR-TB as a leading AMR threat that may be responsible for one in four AMR related deaths by 2050 and tremendous economic damage.



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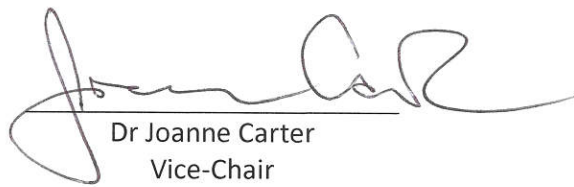
Global TB Caucus

Decision Point 28-6

1. The Board acknowledges the achievements of the Global TB Caucus, expresses its gratitude to the Co-Chairs for their continued leadership, and thanks the Global TB Caucus Secretariat for their work and achievement.
2. The Board thanks Caucus Parliamentarians for their unique contribution of their advocacy in support of the successful Global Fund replenishment.
3. The Board notes the Global TB Caucus strategic directions as presented in the Global TB Caucus Strategic Plan 2017-2020, and commends the focus on priority countries.
4. The Board requests that the Global TB Caucus presents on its progress on the implementation of the Strategic Plan 2017-2020 to the Board at its 29th meeting.

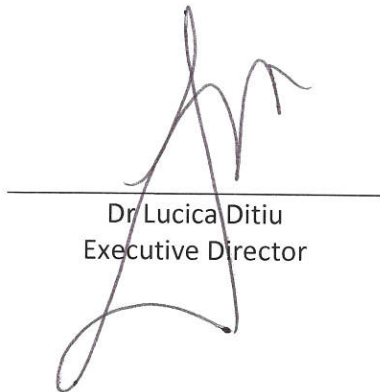


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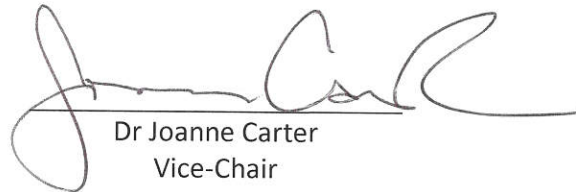


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8. The Board asks the Stop TB Partnership Secretariat to work with WHO, the Stop TB Partnership Working Groups, community platforms, and key partners such as the Global Fund, UNITAID, USAID, and the Union, to ensure alignment and to provide support to country programs for the early adoption and scale-up of new MDR medicines as well as shorter regimens.
9. The Board specifically requests GDF to work with the Global Fund to jointly create robust forecasting and reliable procurement and supply chain management plans to facilitate uptake of shorter regimens.



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Drug-Resistant TB

Decision Point 28-7

Access and Coordination

1. The Board recognizes the increase in the number of people diagnosed and treated for drug-resistant TB. However, the Board expresses significant concern that there are many more people affected by drug-resistant TB who need prevention, diagnosis, treatment, and care and support.
2. The Board notes with concern the small number of products in the research pipeline for preventing, diagnosing and treating TB and drug-resistant TB.
3. The Board notes the potential procurement issues that may arise as countries transition out of Global Fund financing and begin procuring TB medicines with their own funds. The Board encourages the Secretariat to work closely with the Global Fund and other partners to identify and address procurement challenges in a manner that ensures continued access to affordable and quality-assured TB medicines.
4. The Board commends the GDF on its leadership role in establishing the TB Procurement and Market-Shaping Working Group as a means to ensure coordination and alignment among partners. The Board requests GDF to provide regular updates on the progress of the Working Group.


Uptake of new tools

5. The Board recognizes the significant work of TB REACH and GDF in the roll-out of GeneXpert, with GDF accounting for 34% of global sales to high-burden disease countries (excluding South Africa) through 2015.
6. The Board recognizes GDF's work in making delamanid available to more than 100 countries and its continued support in the roll-out of bedaquiline. The Board encourages GDF to continue to work with the manufacturers to ensure availability and negotiate the lowest, sustainable price for all GDF countries.
7. The Board recognizes the benefit of new, MDR medicines as well as new, shorter regimens recently recommended by WHO as well as the challenges involved in facilitating rapid adoption of these medicines and regimens.

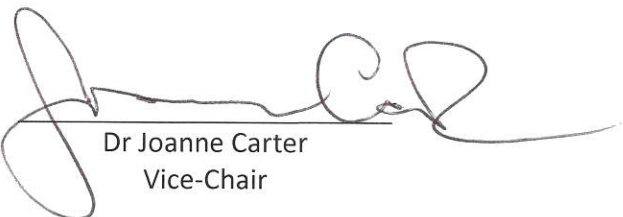
Latent TB Infection

Decision Point 28-8

1. The Board acknowledges the work of the New Tools Working Groups in the development of the Global Plan to End TB 2016-2020.
2. The Board acknowledges the impact that identifying and treating people with TB infection (also referred to as latent TB) will have on achieving the Global Plan 2016-2020 targets and on ending the TB epidemic.
3. The Board supports the New Tools Working Groups in their efforts to promote research in order to develop the tools needed to identify and treat those with TB infection.



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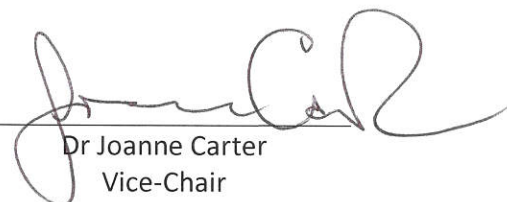
Civil Society Constituencies (NGO and Communities)

Decision Point 28-9

1. The Board recognizes that civil society, including affected communities and NGOs, have been critical in catalyzing and shaping national, regional and global interventions to scale-up the global TB response.
2. The Board welcomes the commitment of the Civil Society Constituencies to continue their work in partnership to advance the realization of the Global Plan.
3. The Board notes the first meeting of TB affected communities and civil society constituency representatives and constituency members held ahead of the 28th Board meeting and supports their efforts to improve communication both within and between the constituencies.
4. The Board requests the Secretariat to facilitate organization of annual in person meetings of representatives of Stop TB Partnership's civil society constituencies and leadership of civil society delegations of relevant global public health organizations and mechanisms, to coordinate, align messages on TB and strengthen the global TB response.



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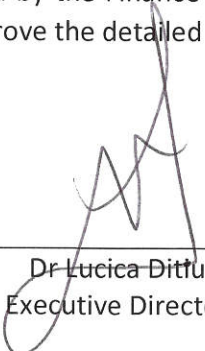


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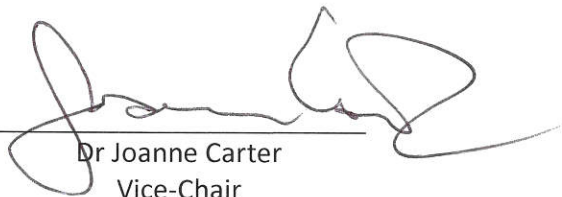
Report of the Finance Committee

Decision Point 28-10

1. The Board thanks the Finance Committee and the Secretariat Finance Team for their work.
2. The Board approves the 2014 and 2015 Annual Financial Management Summary, following the review by the Finance Committee.
3. The Board approves maintaining the level of the reserve at US\$1.7 million as recommended by the Finance Committee.
4. The Board directs the Finance Committee to review regularly the emerging liabilities of the Partnership and submit any modifications needed to the Board as required.
5. Following the recommendation of the Finance Committee, the Board approves the Secretariat to make short-term investments in accordance with the UNOPS Organisational Directive No. 45 on investment principles, which allows only low risk investment options.
6. The Board asks the Finance Committee to guide the Stop TB Partnership in the management of the investment fund and report the progress to the Executive Committee as needed.
7. On the recommendation of the Finance Committee the Board approves the Secretariat to work with the Finance Committee to develop a conservative income forecast, and to work with the Executive Committee to develop parameters for the use of investment returns and GDF fees for approval by the Executive Committee. Both income and expenditure should be actively managed as part of existing finance oversight processes.
8. The Board endorses the high level budget for the biennium 2017-2018 that has been reviewed by the Finance Committee and directs the Executive Committee to review and approve the detailed budget for the biennium 2017-2018 by the end of 2016.



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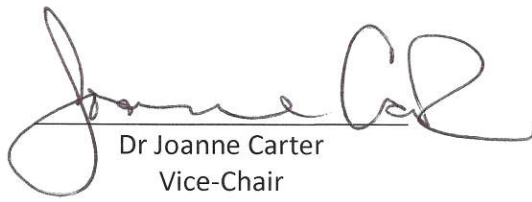
Resource Mobilization

Decision Point 28-11

1. The Board notes its appreciation for the Secretariat, partners and the Ad-Hoc Resource Mobilization Committee for their work to identify the challenges and opportunities in the Secretariat's funding strategy.
2. The Board acknowledges the substantial uplift that many donors recently committed to the fight against TB through their funding to the Global Fund. The Board recognizes the importance of mobilizing resources for the Secretariat to amplify the impact of Global Fund investments in TB.
3. The Board acknowledges the critical need to fill the funding gaps that will impact the Secretariat's ability to fully achieve the impact of the Operational Strategy 2016-2020 and the need to broaden the Secretariat's donor base.
4. The Board requests the Secretariat and Ad-Hoc Resource Mobilization Committee to work with the Board to identify and mobilize the resources needed to fully achieve the impact of the Operational Strategy 2016-2020, including support for TB affected communities to fully leverage the role they can play towards the advancement of the paradigm shift articulated in the Global Plan, and to ensure donors to the Global Fund provide funds to the Partnership to maximize the impact of their existing investments.
5. The Board requests the Ad-Hoc Resource Mobilization Committee to work with the Finance Committee to:
 - i. Monitor and evaluate the progress on the Secretariat's resource mobilization efforts regularly, and provide progress updates as part of the Executive Director's Report to the Board;
 - ii. Explore options for other innovative financing mechanisms to generate additional resources for the Partnership.



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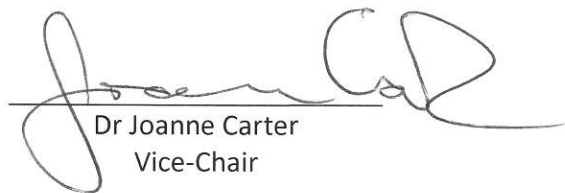
Stop TB Partnership Key Performance Indicators

Decision Point 28-12

1. The Board approves the Key Performance Indicators (KPIs) and associated targets for the Stop TB Partnership Operational Strategy 2016-2020.
2. The Board notes where targets have yet to be calculated and requests the Secretariat to do so by the end of 2016 for approval by the Executive Committee
3. The Board requests the Secretariat to report progress on KPIs to the Executive Committee in Quarter 1 each year, to present to the subsequent Board meeting following discussion at the Executive Committee, and then to make the information publicly available.
4. The Board requests that the KPIs and associated targets are reviewed by the Executive Committee in 2018, and adjusted as necessary.



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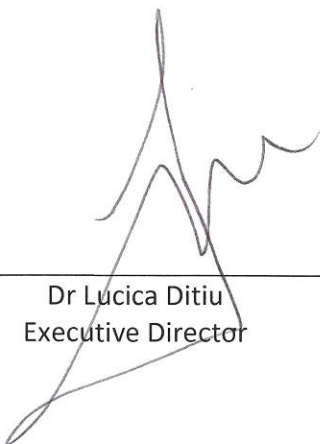


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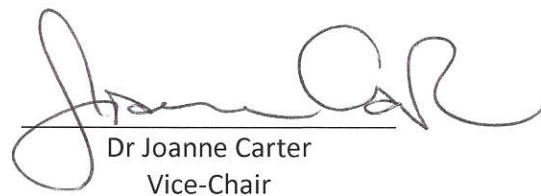
Global Plan to End TB 2016-2020

Decision Point 28-13

1. The Board commends the inclusion of the Global Plan to End TB 2016-2020 in the UN High Level Declaration on HIV/AIDS, and the endorsement of the Global Plan by Ministers in the WHO African Region and by Parliamentarians in over 30 countries who attended the 2nd Global TB Summit. The Board recommends that the Secretariat continue efforts to build support for full implementation of the Global Plan in high level global and regional fora.
2. The Board recognizes the importance of monitoring the implementation of the Global Plan and supports efforts of the Secretariat to work with the Global TB Programme and other partners to align on key indicators that can be used across the TB field to track progress and to report annually on the following using data collected mainly by other partners:
 - i. Progress on reaching the 90-(90)-90 targets;
 - ii. Adoption of new policies and tools;
 - iii. Availability of financial resources for implementation; and
 - iv. Availability of financial resources for research and development.
3. The Board asks the Secretariat to identify any gaps where the data to track progress of the Global Plan does not exist, for example in the second (90), and to prioritize advocating for that data to be tracked and reported by the appropriate partners.



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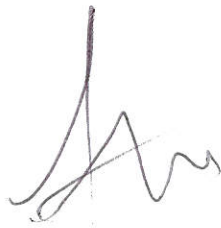
Global Fund

Decision Point 28-14

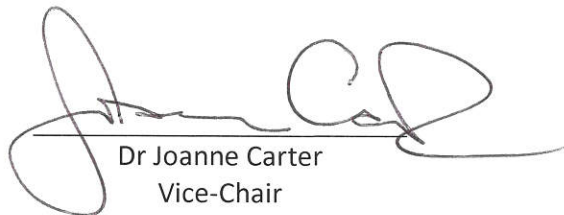
1. The Board congratulates the Global Fund, all partners including people affected by TB, advocates and donors to the very successful replenishment meeting of the Global Fund. The Board is committed to ongoing replenishment efforts to further progress towards defeating the three diseases.
2. The Board acknowledges the central role of the Global Fund as core external source of funding for TB. The Board underlines the role of the Global Fund in supporting ambitious TB scale-up plans necessary to achieve the Global Plan to End TB 2016-2020 and the End TB Strategy targets.
3. The Board commends the key role of the Secretariat in ensuring the wider TB community voice is represented in all Global Fund related processes and platforms. The Board recognizes the work of the Stop TB Partnership and Secretariat in support of the successful replenishment as well as the development of allocation methodology and catalytic funding proposal for the period 2017-2020.
4. The Board notes the work of the Secretariat in ensuring maximum impact of Global Fund grants at country level through specific country support, TB Situation Room, Implementation Through Partnership (ITP), as well as the specific work on communities, rights and gender, procurement and supply, and increasing case detection.
5. The Board applauds the signed Memorandum of Understand (MoU) between the Global Fund and Stop TB Partnership's Global Drug Facility and is looking forward to the MoU to be established between Global Fund and Stop TB Partnership's TB REACH.
6. The Board requests the Secretariat to work with the Global Fund and partners to support countries to make effective use of their full Global Fund allocation to maximize impact.
7. In light of the nearly USD 13 billion dollars raised so far for the Global Fund 2017-2019 replenishment, the Board requests the Secretariat to work with all partners and the Global Fund Secretariat to support countries to ensure that:
 - i. All instruments of the Global Fund are fully applied to address critical needs like finding the "missing cases" and financing gaps in TB considering that TB

was able to benefit from incentive funding and regional investments in the last funding cycle;

- ii. Develop integrated TB/HIV concept notes and implementation of TB-HIV integrated interventions (including ensuring HIV programs contribute their share of funding to guarantee full implementation) in order to optimize disease strategies within the systems for health;
- iii. In countries transitioning from Global Fund funding, TB investments are protected with domestic resources, the needs of people affected by TB and vulnerable groups are addressed, and civil society networks are supported;
- iv. Successful TB REACH interventions are scaled up in the Global Fund grants and through domestic budgets; and
- v. The highest possible impact is achieved through a differentiated approach in supporting TB programs to utilize Global Fund resources, taking into consideration vulnerable groups and growing epidemics.



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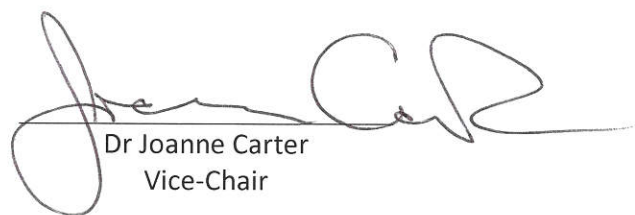
Governance

Decision Point 28-15

1. The Board notes this is the last meeting for Evan Lee in his role as representative of the Private Sector Constituency and thanks him for his contributions as Board member in 2013-2016.
2. The Board thanks Shirley Bennett for her invaluable service to the Board and Partnership as Governance Officer and wishes her well in her next endeavor.
3. The Board requests the Secretariat to utilize the processes outlined in the Governance Manual to:
 - i. Fill the vacancy on the Finance Committee,;
 - ii. Work with the Private Sector constituency to identify the next Private Sector Constituency Representative; and
 - iii. Explore if Board members or constituency representatives are interested in joining the Executive Committee.



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Standard Operating Procedures

Decision Point 28 - 16

1. The Board notes with appreciation the positive, productive and proactive relationship the Secretariat has with UNOPS.
2. The Board approves the updated Stop TB Partnership Standard Operating Procedures and asks the Secretariat and UNOPS to review and update as needed.



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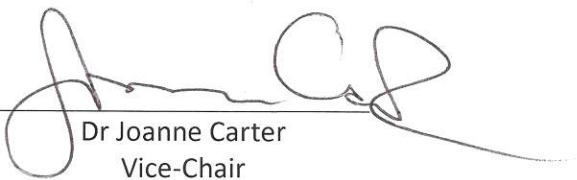
Closing

Decision Point 28-17

1. The Board requests the Executive Committee to decide on dates and locations for 29th and 30th Coordinating Board meetings.



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