Independent Oversight and Advisory Committee
for the WHO Health Emergencies Programme
Meeting Report

Sixth meeting by phone 8 February 2017
Geneva, Switzerland 14:00–15:00 CET

Agenda: please see Annex

Participants:
Ms Precious Matsoso (Chairperson), Dr Geeta Rao Gupta, Dr Felicity Harvey, Mr Jeremy Konyndyk,
Dr Hiroki Nakatani

Summary of discussions
The agenda topics included a debriefing on the IOAC session at the Executive Board (EB) meeting,
review of the IOAC deliverables and indicators for 2017 and an update on preparations for
forthcoming activities.

Debriefing on the IOAC session at the Executive Board
The Chair welcomed members and provided a debriefing on the IOAC’s participation in the 140th EB,
23 January – 1 February 2017. Four members attended the EB and the report was presented on the
first day under agenda item 7.1, Health Emergencies.

The Chair briefed members that the IOAC report was well received and appreciated by WHO
Secretariat, Member States, and other stakeholders. There is a high expectation of the next report
and interest in interacting with the IOAC. The Chair encouraged members to continue working
together, building on the success of the first report. The Chair added that there was a
misunderstanding of the IOAC’s role regarding the Joint External Evaluation (JEE) by some Member
States and advised that the next report should further clarify this when making recommendations.

Dr Peter Graaff debriefed the Committee on EB discussions regarding topics of direct relevance to
WHE’s work. The Committee acknowledged that high-level issues were discussed at the EB including
the IHR Draft Global Implementation Plan (EB140/14), public health implications of the
implementation of the Nagoya Protocol (EB140/15) and the Pandemic Influenza Preparedness (PIP)
Framework (EB140/16).

The EB considered the first report of the 2016 PIP Framework Review Group and asked the DG to put
forward a new proposal for consideration by the EB in January 2018 on what proportion of
partnership contributions should be used for inter-pandemic preparedness measures and what
proportion should be reserved for response activities in the event of a pandemic.
During the EB, the IOAC carried out interviews with selected Member States and WHO regional directors. The summary notes were shared prior to the teleconference.

The Committee noted that the Member States responded positively to the IOAC’s interview request and continuous interaction would be expected. Members noted that some of the comments on the CERF, GHC, funding gap and expectation on the economic investment case would merit further examination.

In view of the upcoming G20 Meeting, the Chair proposed that the IOAC could consider engaging with G20 through a letter that could bring to the attention of the G20, the potential risk that the newly established Programme is facing due to inadequate funding.. The IOAC discussed this possibility but concluded that it would not be advisable to write such a letter because it is important that IOAC maintains its neutrality. The Committee would, however, welcome an opportunity to engage the G20 on a broader range of issues that it is monitoring, including financing, if the IOAC were invited to do so.

Referring to the summary note on the interviews with RDs, a member expressed concerns about the line of authority, which has been a structural challenge throughout the reform process. The member suggested that the Committee should explore this issue in its next report. The concern was also raised that the Regional Directors may have a different understanding of the degree of change and improvement which will be required to restore donor confidence.

Review of the IOAC deliverables for 2017 and indicators proposed by the WHE
The Committee discussed the deliverables for 2017, which are extracted from the IOAC report to the last EB and the performance indicators suggested by the WHE for 2017. The Committee agreed to streamline and focus on key issues of concern to the IOAC using the relevant results framework indicators as they were presented to the EB. The Committee noted that indicators are weak in the area of Partnership and that specific indicators are required. Indicators for the areas of HR, Incident Management, Risk assessment, IHR and Finance should also be improved reflecting the Committee’s first report and the EB discussions.

Measurement of the respective performance of each level of the Organization was suggested, as appropriate, in particular for the areas of HR and Finance. This would help to assess whether the Programme is being implemented at all three levels.

Members observed that some of the results framework indicators are generic and thus are not useful for tracking progress in terms of implementation and assessment of the effectiveness of the Programme.

The Committee appreciated the concern of the DEXD/WHE i.e. that including a series of indicators over and above those included in the Programme’s Results Framework might generate disproportional amount of work load for WHE staff.

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A member has offered to provide inputs for the priority issues including incident management, risk assessment, partnership and JEE and to make the target of monitoring clearer using the WHE performance indicators. A revised list of deliverables and indicators will be circulated for members’ review.

**Forthcoming field visits and a face-to-face meeting**

Dr Isabelle Nuttall briefed the Committee on preparation for the IOAC activities planned in March.

(1) **Country visit to Nigeria, 5–11 March**

Two members are planning to travel to Abuja for a series of interviews and to visit Maiduguri in Borno State, northeast Nigeria. WHO has been informed that the government has decided to close Abuja Nnamdi Azikiwe International Airport (ABV) from 8 March for runway repairs. This may impact the IOAC Mission to Nigeria. The WHO security team is closely monitoring the situation and will make suggestions in due course. The WHO Country Office in Nigeria is committed to providing all necessary support for the IOAC’s visit.

(2) **Country visit to Iraq, 21–25 March**

The country visit will also be conducted by a team of two IOAC members. Given the short duration of the visit and the requirement of 4 days’ field security training in Erbil, it will not be feasible to visit Mosul. The Country Office will make arrangements for logistics and the IOAC’s visit programme. The Committee asked the WHO Secretariat to ensure the availability of key staff and partners to meet with the IOAC team to make the visit meaningful.

(3) **Face-to-face meeting in Jordan, 26–27 March**

The Regional Director of EMRO has agreed to host the meeting in Amman and preparations are progressing in close collaboration with the Regional and Country Offices. The main purpose of the meeting will be to draft the report to be submitted to the 70th WHA, which will be held in Geneva from 22 to 31 May 2017. During the last EB, DG requested that the IOAC report be submitted 4 weeks before the WHA instead of 6 weeks, which is the deadline for governing bodies’ documents. The Committee agreed to submit a final draft report to the Secretariat for editing and translation into six languages by 20 April 2017.

Members advised inviting selected WRs in the region to the IOAC meeting, and recommended the participation of the Executive Director and Regional Emergency Directors. The Committee acknowledged that Amman is an important hub for humanitarian operations where key partners are present, including UNHCR, UNICEF, IOM, MSF, and IFRC. Therefore, the Members also recommended inviting key partners for an interview during the meeting.

A tentative agenda and list of participants will be drafted in consultation with HQ, EMRO and WCO Jordan for discussion. The Committee will continue working via email until this next in-person meeting.