The Global Policy Group held its fourth meeting of 2016 at WHO HQ on 3-4 November. The meeting was chaired by the Director-General, with the Deputy Director-General and Regional Directors from the Africa, European, South East Asian and Western Pacific Regions in attendance. The GPG discussed the following agenda items.

**Programme Budget and Financing.** Dr Hans Troedsson, Assistant Director-General of General Management, joined the GPG for discussions on the current financial situation for the programme budget 16-17, prospects for the programme budget 18-19, the proposed increase in assessed contributions, and the recent evaluation of the Category Networks and Programme Area Networks. Ten months into the current biennium, there is a funding gap of approximately USD 500 million (this will reduce following commitments announced during the recent financing dialogue). The GPG agreed on the need to take steps to manage the potential deficit, including delaying recruitments. The draft proposed programme budget 18-19 has been discussed in the Regional Committees, and based on the feedback provided, a revised draft is in preparation for the Executive Board in January, with the involvement of Category Networks. The GPG agreed that the SDGs need to be better reflected in the proposed programme budget 18-19, particularly alignment of targets and indicators, but also a broader reflection of how the programme budget overall contributes to the SDGs, and how this is influencing the work of WHO at the country level, including in terms of the normative work of the Organization. The GPG agreed that background information will need to be prepared for the PBAC and Executive Board, including (a) a justification for the proposed increase in assessed contributions, (b) an update on the financing of the programme budget 16-17, including a report of the Financing Dialogue, and (c) additional information on cost savings, prioritization, accountability & transparency, and value for money. The GPG decided to establish a small working group to follow up on the recommendations from the recent evaluation of Category Networks and Programme Area Networks.

**Health Emergencies.** Dr Peter Salama, Executive Director of the WHO Emergencies Programme, briefed the GPG on developments with the WHO Emergencies Programme, highlighting: (i) clarifying the role of the HWOs and the IMS; (ii) strengthening integration of communicable disease and humanitarian teams; (iii) management of chronic/endemic situations (eg Zika); (iv) reporting of events when Member States are reluctant to do so; (v) structure and business model of work at the country level; (vi) communications and advocacy linked to resource mobilization; (vii) accountability for results; and (viii) sustainable financing model. The GPG expressed appreciation for the work so far, highlighting the need to redress the imbalance in the distribution of staffing, which has been weighted towards HQ. The GPG discussed proposed steps to strengthen country offices, which included a review of office structures and capacities in priority countries, linked to WHO work on UHC and health systems strengthening and national plans on core capacities, and taking into account the polio transition planning, which is underway in several priority countries. The GPG welcomed the rapid progress with implementation of Joint External Evaluations, noting that adequate financing of the national action plans for core capacity strengthening is essential, and linked to national multisectoral planning for the SDGs, as well as planning for health systems strengthening and national action plans for AMR, with engagement of key financial contributors where appropriate. The GPG expressed grave concern at the numbers of attacks on health care facilities, emphasizing the important roles of WHO in gathering and verifying authoritative information in real time, and implementing an advocacy strategy and communications campaign on attacks on health care.

**Sustainable Development Goals.** Dr Chris Dye, Director of Strategy, Policy and Information, briefed the GPG on the development of a draft conceptual framework for a strategic approach to health in
the SDGs, which will be presented to the WHA through the EB, and is based on six universal instruments of change: intersectoral action by multiple stakeholders; health systems strengthening for universal health coverage; health equity and human rights; financing the SDGs; scientific research and innovation; and monitoring and evaluation. The GPG welcomed the draft framework and decided to establish an internal SDG coordination mechanism, under the leadership of the DDG, as a temporary transitional arrangement to facilitate and monitor work on SDGs across the Organization, and promote organizational learning across countries and regions.

**Post-polio eradication transition planning.** The GPG discussed the polio transition planning, as the GPEI ‘ramps down’ in the period preceding and following eradication. A detailed mapping has been conducted to inform the transition planning in relation to (a) 16 polio-priority countries with greater than 90% of all polio-funded assets; (b) global level transition planning with partner agencies (WHO, CDC, UNICEF, CDC, Rotary and BMGF); and (c) GPEI post certification strategy development. The GPG recognized that the polio transition is one of the key corporate risks for WHO, welcoming the recent establishment of an organization-wide task force to manage this process.

**Immunization.** The GPG expressed concern that the current pace of global progress in immunization is slow and significant gaps remain to meet the Global Vaccine Action Plan coverage and disease control/elimination targets. Vaccine shortages have occurred in some critical areas, for example polio. There is insufficient support to strengthen the delivery of on-going immunization services and insufficient resources to support surveillance to guide programme strategies and operations. There is a need for improved communication and collaboration to strengthen and sustain commitments in countries and globally.

**Implementation of FENSA.** The GPG reviewed progress in implementation of FENSA, highlighting the urgent need to develop tools to aid implementation of FENSA, including the guide for staff, and handbook for non-State actors. At the same time, they recognised the need for a clear strategic approach to the promotion of engagement, and appreciated the need for the active engagement of RDs in guiding this process.

**Compliance with procurement rules.** The GPG reviewed the annual report of the HQ contract review committee, and expressed concern at reports of non-compliance with procurement procedures, as 10% of requests reviewed in 2015 were non-compliant and were either rejected or returned back to the technical units. They requested the Comptroller to make a detailed proposal for the consideration of the GPG on steps to assure the quality and cost effectiveness of procurement.

**Preparation for Governing Body meetings.** The GPG reviewed the arrangements for the forthcoming governing body meetings, noting that the PBAC has been extended to provide adequate time to review the proposed programme budget 18-19, and to review applications for official relations from non-State actors. The Executive Board is also extended in order to provide sufficient time for the nomination process for the Director-General.

**Incentives to attract qualified candidates to countries in crisis.** In recent months, some senior positions in countries in crisis have been difficult to fill, with relatively few qualified and experienced applicants. The GPG agreed that an incentive payment as agreed by the UNGA would be the most effective way of attracting candidates for such positions without creating new liabilities for the Organization.

The next meeting of the GPG will be held on 16-17 January 2017, immediately prior to the PBAC.