Seventh Strategic Advisory Group  
Face-to-Face Meeting (16 April 2018)

Note for the record

<table>
<thead>
<tr>
<th>Attended:</th>
<th>Apologies:</th>
<th>GHC Unit (GHCU):</th>
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| Rachael Cummings (RC)  
Wilma Doedens (WD)  
Andre Griekspoor (AG), co-chair  
Juma Khudonazarov (JK)  
David Lai (DL)  
Jorge Martinez (JM)  
Dorit Nitzan (DN)  
Sonia Walia (SW) | Trina Helderman (TH) | Linda Doull (LD)  
Elisabetta Minelli (EM) |

7.1 Introduction

**Discussion**  
AG presented the meeting agenda and objectives.

**Decision**  

**Action**  

7.2 Update on current GHC status and re-prioritization of work-plan deliverables

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<th>Discussion</th>
<th>Decision</th>
<th>Action</th>
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<td>LD updated the SAG on progress against 2018 work-plan activities, highlighting those on track, on hold or delayed and focusing on the implementation challenges. Whilst progress continues, it is slow with important gaps and insufficient action in some areas. LD recalled the financial</td>
<td>• SAG decided all planned activities are essential and none should be taken out of the current 2018-2018</td>
<td>• SAG to invite GHC partners to engage in the work of the Task Teams and apply to Request for Proposals.</td>
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and human resources status presented at the 8 March 2018 meeting.

SAG members discussed various ideas to ensure implementation of work-plan, despite the limited resources:

- Re-extend invite to all GHC partners to engage in the work of the Task Teams.
- Partners to apply to Requests for Proposals issued by the GHC.
- Country Health Clusters to become champions for the implementation of one activity, raise funds and drive it forward.
- Partners to document implementation of the guidance, e.g. cash and EPHS, at country level and support with dissemination.
- GHC to initiate discussion with WHE regional focal points for operational partnerships to discuss common deliverables and plan jointly.
- Focus on the following priority areas: coordination solutions, EPHS, cash, quality, Public Health Information Services standards.

In addition, the activity related to the rapid response mechanisms was further discussed. SAG members agreed that JM should contact the Health Cluster Coordinators and enquire about these mechanisms in their country. A final decision can be made at the Health Cluster Forum.

<table>
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<th>Work-plan</th>
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<td>SAG agreed on 5 priority areas: coordination solutions, EPHS, cash, quality, Public Health Information Services standards.</td>
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| GHC unit to set up a call conference with WHE regional focal points for operational partnerships. |
| JM to contact Health Cluster Coordinators about the rapid response mechanisms. |
### 7.3 Resource mobilization strategy

SAG members noted the challenging financial status and that a resource mobilization strategy for the Health Cluster is not in place.

SAG members discussed the need to develop concept notes/two pagers and costed detailed work-plans for each of the 5 identified priority areas: coordination solutions, EPHS, cash, quality, Public Health Information Services standards.

SAG agreed on the need to develop concept notes for resource mobilization for the 5 identified priority areas.

- SAG / Task Teams / GHC unit to develop 5 priority areas concept notes and costed work-plans.

### 7.4 Public Health Information Services (PHIS) Standards roll-out and PHIS Consortium

LD provided an update on the current status of PHIS standards roll-out and PHIS consortium. SAG members discussed the strategic importance of PHIS for the cluster, according to the GHC Strategy 2017-2019.

SAG members questioned whether WHO is fully committed to PHIS (scale and speed) and decided to request the Task Team for an implementation plan for both the PHIS standards roll-out and the PHIS consortium, including clear deliverables and costs.

SAG requested additional clarity on PHIS consortium and PHIS roll-out implementation plan required.

- PHIS TT to provide a clear implementation plan for both the PHIS standards roll-out and the PHIS consortium, including clear deliverables and costs.

### 7.5 Partner Meeting preparations

LD presented the agenda. SAG members finalized the agenda, agreed on the SAG report presentation and chairing roles.

- SAG members to chair different sessions of the Partner Meeting.
- AG to present on SAG
It was discussed that the SAG report presentation will also include the outcomes from the Task Team meetings held on 16 April and progress on the knowledge bank.

### 7.6 Governance

**SAG members’ term**

SAG considered the possibility to revise current SAG terms of reference to allow an additional one year for SAG members. SAG discussed information should be sent to partners for agreement/disagreement.

In addition, SAG members discussed various governance issues that may constitute the object of a governance review, either aligned to the development of the next GHC strategy process or as part of a wider external evaluation of the cluster:
- engagement of current partners
- expansion to additional partners at global level

There are currently no resources for external evaluation of the GHC.

**Vacancies for SAG co-chair and NGO/non-UN operational partners**

No nominations received at the moment. LD encouraged the SAG members to address this gap to ensure partners’ influence is maintained and CLA held to account.

**New applications**

- iMMAP - approved on the basis of its long-standing

- SAG decided to propose a revision to the SAG terms of reference to include a three year term for SAG members.
- SAG decided iMMAP approval; while CRED and IPAS need additional information and further discussion.

- GHC unit to send to GHC partners a proposed revision of SAG terms of reference that would include a two year term for SAG members with the possibility to extend for one extra year (2+1).
- SAG to invite GHC partners to submit nominations for the vacancy for NGO/non-UN operational partners.
- SAG members representing NGO/non-UN operational partners to consider the SAG co-chairing role.
- GHC unit to inform new applicants on SAG decisions.
collaboration with the PHIS Task Team and their role as stand-by partners in support of Country Health Clusters.

- **CRED** – on hold. Consult with PHIS Task Team on whether they could be better suited for membership with the PHIS Consortium.
- **IPAS** – on hold. SAG needs to further consider answers received to their questions.

**Next SAG meeting and Partner Meeting**

- The next SAG meeting will have to include a discussion on the next GHC Strategy.
- The next Partner Meeting may have a different format, and include the other networks.