

Nineteenth RBM Partnership Board Meeting

Wednesday, December 8, 2010

Time	Agenda item	Presenter
09.00–11.00	Adoption of Updated 2011 PWP and Budget 2011	UNDP
11.00–11.30	Break	
11.30–13.00	Board Recommendations on Future Priorities and Targets for 2012 Partnership Workplan	Board Chair
	Summary Board Decisions	Board Chair
13.00–14.00	Lunch	



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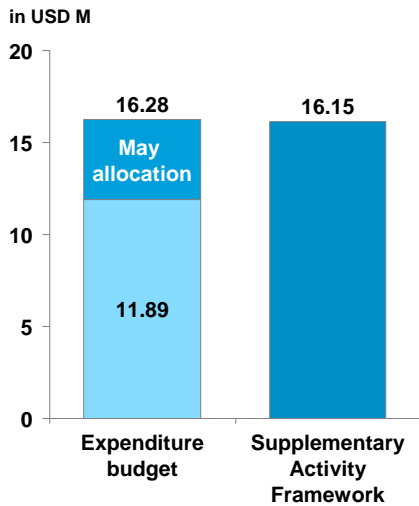
Financial Report – 31 October 2010

19th RBM Board Meeting
Lusaka, December 5 - 8



RBM Budget 2010 made up of an expenditure budget and SAF

RBM Budget 2010



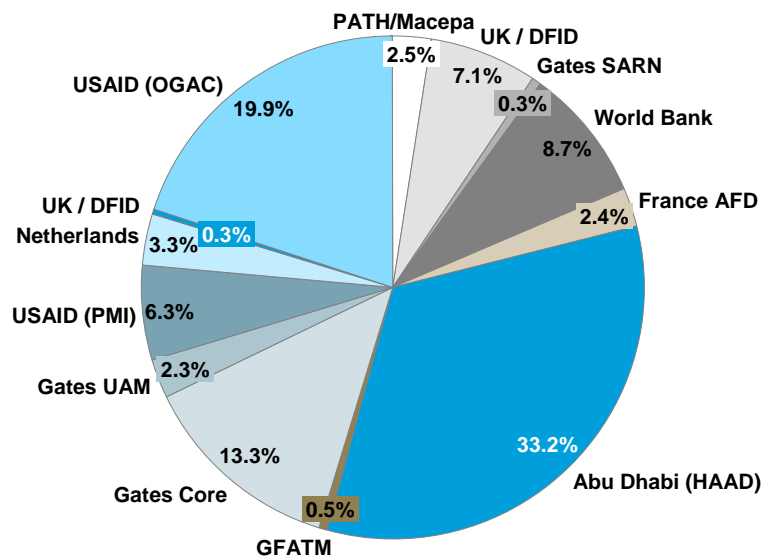
Overview

- Initial expenditure budget was \$11.8 M for SRNs, the Secretariat, and four working groups
- SAF represented activities where no funding was available
- SAF allocation of \$4.3M took place in May
- Two reprioritizations moved funds from the Secretariat to working groups in August and September
- A total of seven working groups were allocated RBM funding by end of 2010



3

RBM with a diverse and international funding base in 2010



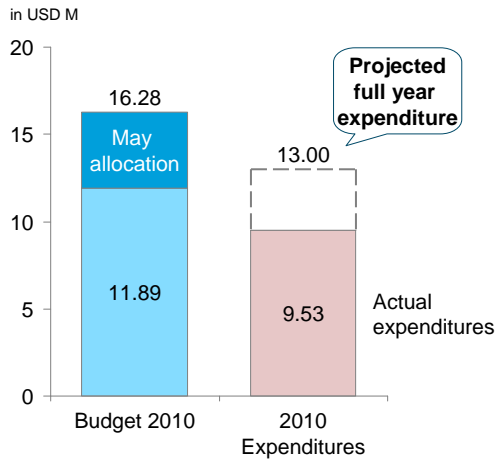
Represents total donor funding of \$15.08M



4

Implementation rate expected to reach about 80% of budget

Budget 2010 and expenditures



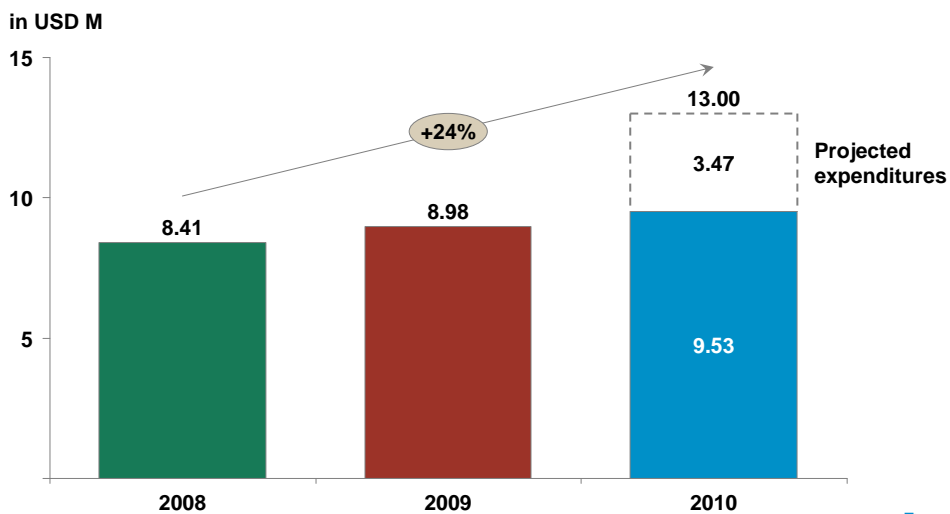
Insights into spending patterns

- Real increase in spending over 2008
- ~27% of the Budget added in May
- Reprioritization during year has affected implementation rates of targets and mechanisms
- Some working groups received funding only after reprioritization in August and September
- Communication to mechanisms regarding spending patterns during year was limited



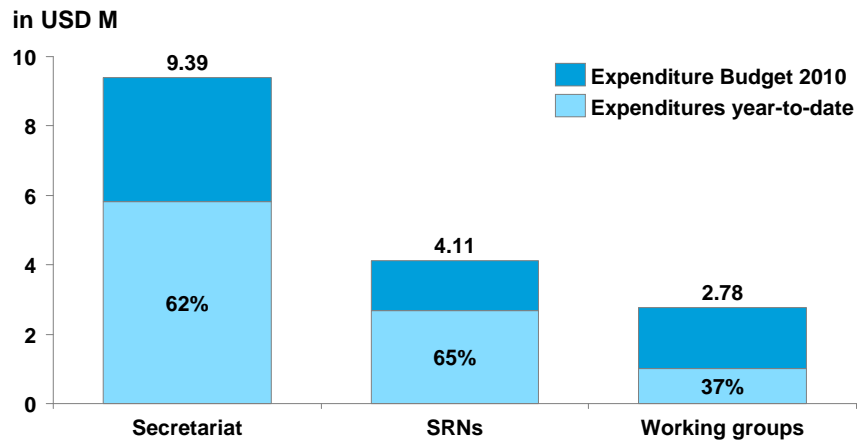
5

Overall RBM expenditures have risen significantly since 2008



6

Implementation rates varied across the different mechanisms

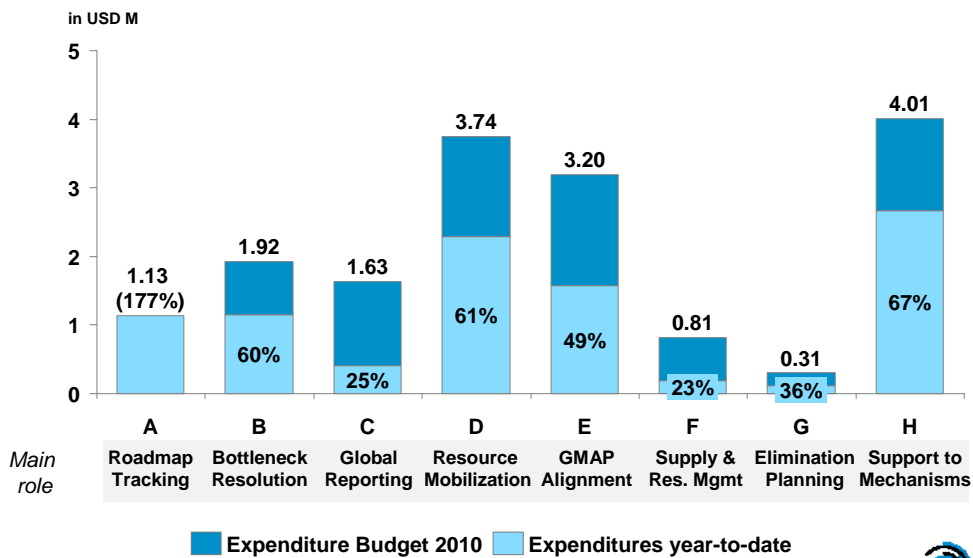


Overall expenditures year to date ~ 59% of approved expenditure budget but expected to reach 80% by the end of year



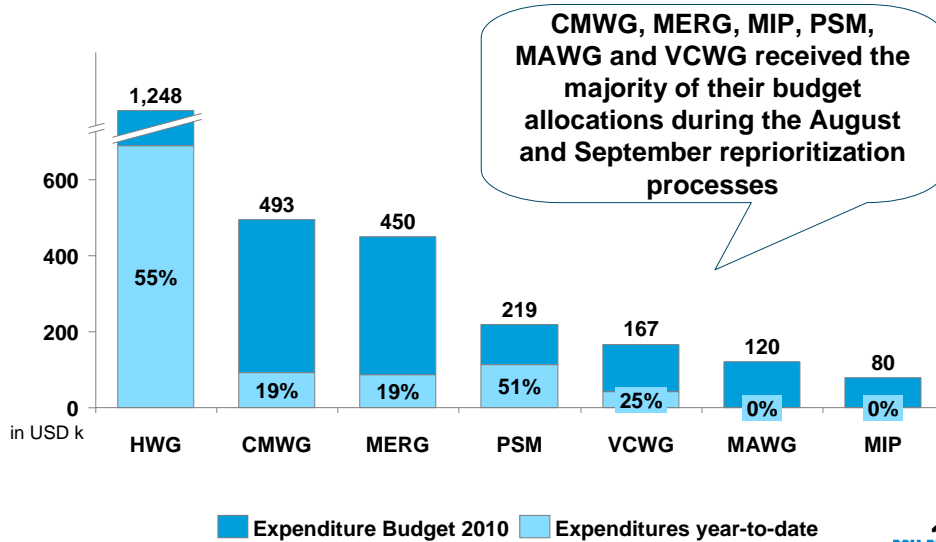
7

Stronger utilization in roadmap tracking, resource mobilization, and support to the mechanisms

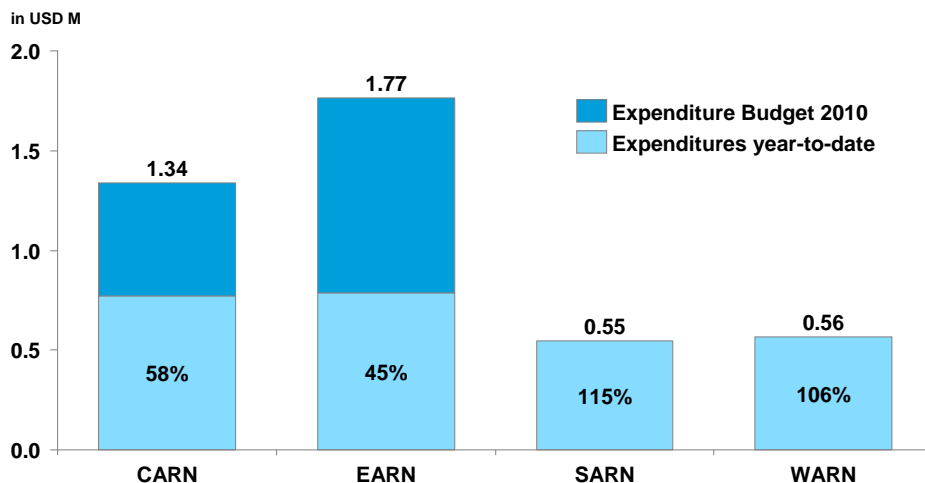


8

Many working groups received funding late in the year and were unable to fully utilize their budgets



The smaller SRNs exceeded their allocated budgets in 2010



Variance partially explained by budgeting inconsistencies and that focal points for each region not in place for entire year



Lessons learned from the RBM Budget 2010

Challenges in Budget 2010

Improvements needed in activity costing

Low utilization by many mechanisms

Limited transparency regarding activities included in budget and in reporting to mechanisms

Lack of clarity around the role of the SAF

Adjustments made in Budget 2011

Activity based budget developed

Many activities with target start dates to enable better tracking and increased Secretariat support

Work plans and budgets structured to monitor progress and to ensure accurate reporting

Clear guidelines provided to mechanisms regarding SAF; only highest priority activities included



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Requested Board Action

The Board is requested to note the Financial Report as of October 31, 2010



12

Revised PWP and Budget 2011

December 8, 2010



RBM is putting its funds to good use

Awareness and
resources raised

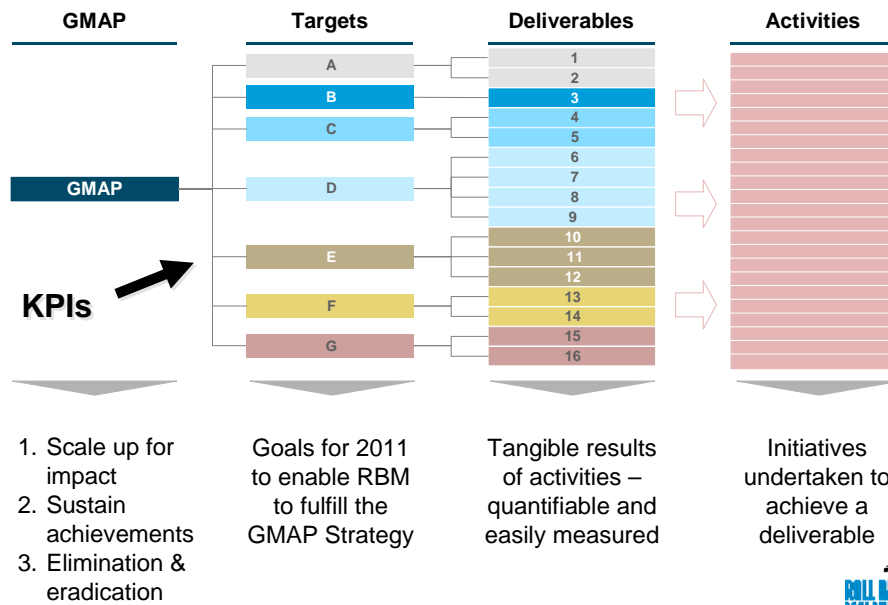
Bottlenecks resolved

Facilitated and
coordinated activities
among partners

Roadmaps tracked and
updated



Key ingredients of the Partnership Work Plan (PWP)



15

This year's planning process was compressed into three months

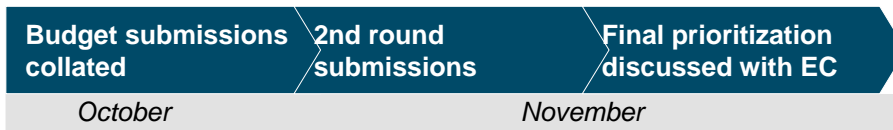


- PWP review workshop conducted
- Targets, deliverables and activities refined
- Outcomes communicated to all mechanisms
- Final comments incorporated into PWP document
- Costing model and guidance developed and provided to mechanisms
- Costing model pre-filled with the activities identified by mechanisms in review process
- Mechanisms assisted by the Secretariat to complete costing model



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This year's planning process was compressed into three months



- Budgets submissions consolidated
- 2011 Budget ceilings set
- FWS-FPC requested Secretariat to work with mechanisms to reduce the initial requests
- Communication to mechanisms regarding budget and SAF ceilings
- Mechanisms provided with consolidated submissions to ensure full transparency
- Second round submissions totalled US\$22 M
- EC informed that further reductions required
- Ad-hoc Budget Review Committee established



This year's planning process was compressed into three months



Prioritization communicated:

- The activity should be a unique function of the RBM Partnership
- Urgent emergency activities should be given priority (Resistance Management and Resource Mobilization)
- Past spending patterns taken into consideration.
- Final submissions required additional \$800K reduction
- The Ad-hoc Committee reviewed and identified lower priority activities to move to the SAF
- Proposal sent to all mechanisms - no comments were received
- Proposal finalized and submitted to the FPC for endorsement



Benefits from revision of RBM Partnership Work Plan 2011

- Increased accountability**
 - Standardized work plans developed per mechanism will allow accurate and consistent reporting
- More efficient coordination**
 - Work plans shared - enabling increased coordination
 - Allows Secretariat to better facilitate actions
- Builds prioritization discipline**
 - Enhances structure and rigor to planning process; activities based on priorities, cost, and contribution towards achieving targets
- Greater financial transparency**
 - Three-dimensional structure of Budget and financial reports provides external and internal stakeholders increased transparency



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Target progression for PWP 2010 - 2011

Rio Board Approved Targets

- A** 100% of all country roadmaps are tracked
- B** Appropriate response to 80% of country TA requests via Sub-Regional Networks
- C** RBM Community and heads of State informed on the achievements of 2010 Universal Coverage and preparation for 2015 targets
- D** Resources mobilized to fill the gap to reach the \$6 billion annual target
- E** 45 counties/territories to align their strategic / operational plans with the GMAP
- F** Implement global and regional strategies for drug and insecticide resistance management
- G** Prepare for elimination (8 countries supported to align their strategic/operational plans with GMAP)
- H** Effective management support for RBM Mechanisms consist with Board decisions

May Board Approved Targets

- A** 100% of all country roadmaps are tracked monthly through to the end of 2011
- B** 80% of country TA requests via Sub-Regional Networks receive a response outlining a plan to meet the request and satisfactory to the country concerned within two weeks of the initial request
- C** The RBM Community and Heads of State / Government to be informed by the end of 2011 on the achievements of 2010 Universal Coverage and the preparations for 2015 targets
- D** Resources to be mobilized to fill the gap to reach the \$6B annual target to fund the GMAP by the end of 2011
- E** 45 counties/territories to align their strategic / operational plans with the GMAP by the end of 2011
- F** Global and regional strategies for drug and insecticide resistance management to be developed by WHO-GMP and relevant RBM WGs, rolled out, and fully implemented by end of 2011
- G** By the end of 2011, eight countries to start to be supported (to the countries' satisfaction) to align their strategic/operational plans with GMAP in order to begin programmes by the end of 2015 to achieve the elimination of malaria
- H** RBM Mechanisms receive management support from the Secretariat (as measured by performance feedback from the Mechanisms) consistent with Board decisions throughout 2011

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Outcome from PWP review process

Highlights of review

Detailed review of targets, deliverables, and activities led to:

- Extensive changes to 2011 activities
- Rationalization of deliverables from 23 to 16
- Incorporation of previous Target G (Elimination) into Targets D, E, F

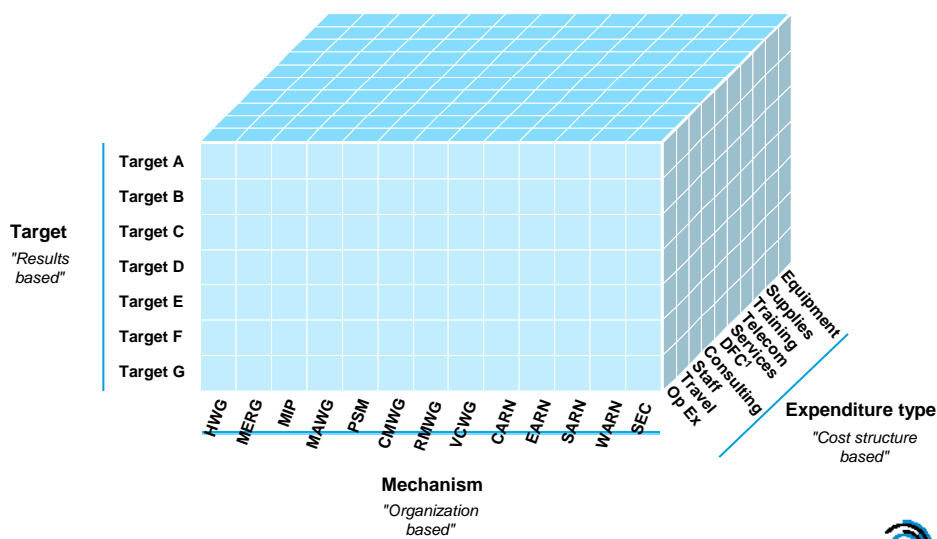
Proposed Targets

- A** 100% of all country roadmaps are tracked monthly through to the end of 2011
- B** 80% of country TA requests via Sub-Regional Networks receive a response outlining a plan to meet the request and satisfactory to the country concerned within two weeks of the initial request
- C** The RBM Community and Heads of State / Government to be informed by the end of 2011 on the achievements of 2010 Universal Coverage and the preparations for 2015 targets
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Budget 2011 was prepared and will track performance in three dimensions

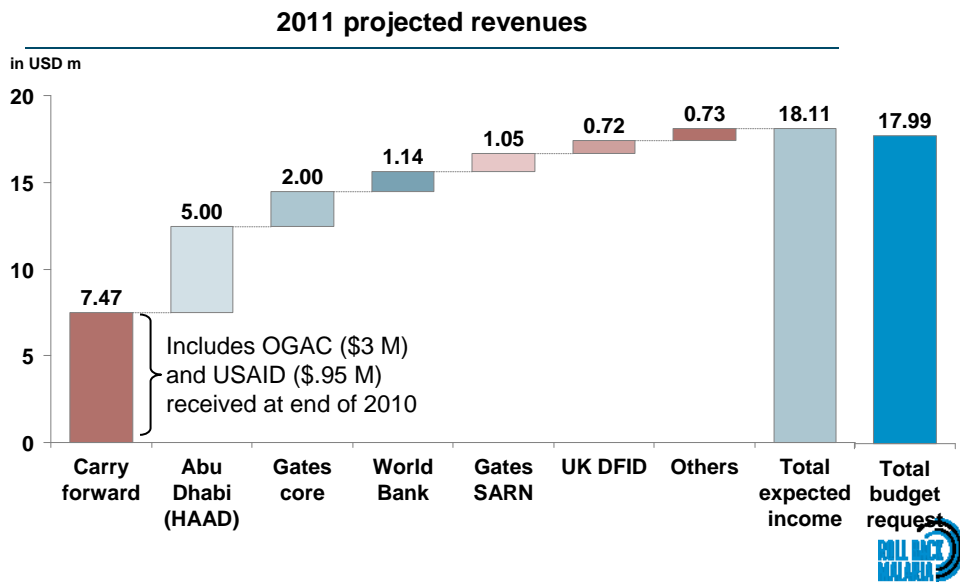


1. DFC stands for "Direct Financial Cooperation"

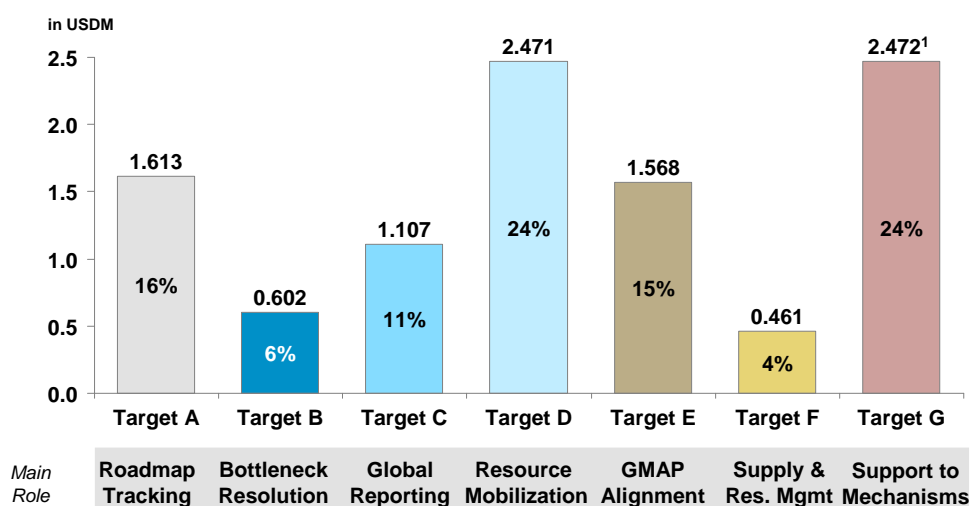


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Budget 2011 includes large carry over which may not be available in future years

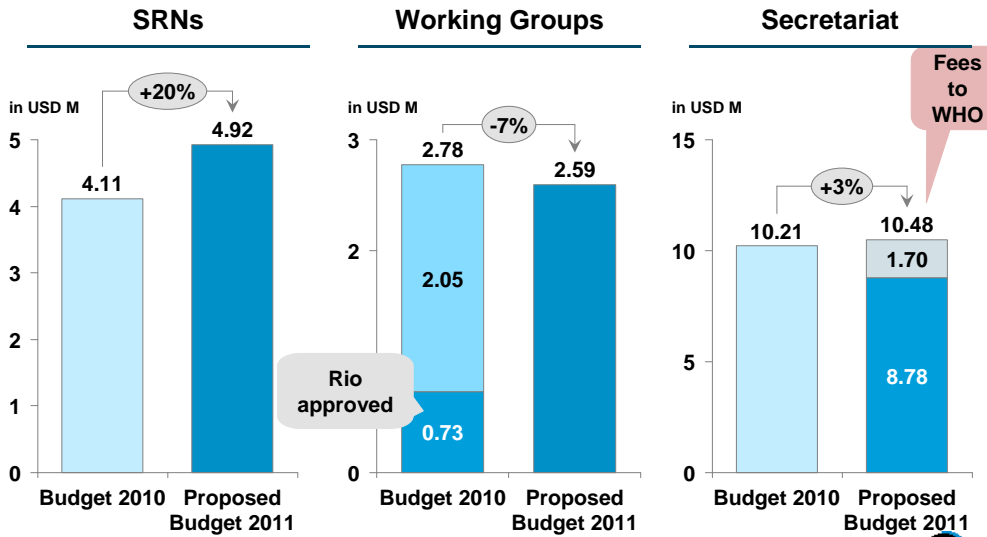


Budget 2011 priorities focus on resource mobilization for GMAP and resistance management



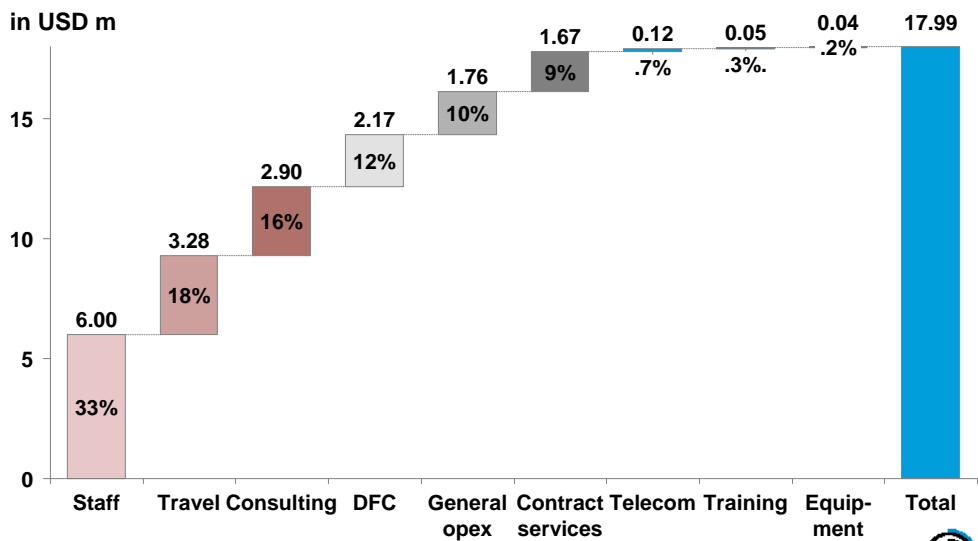
1. Activity budgets reflected above - target G excludes staff budget of USD 6.0 M and 1.7 M in fees to WHO

RBM Budget 2011 is ~11% higher than the Budget 2010



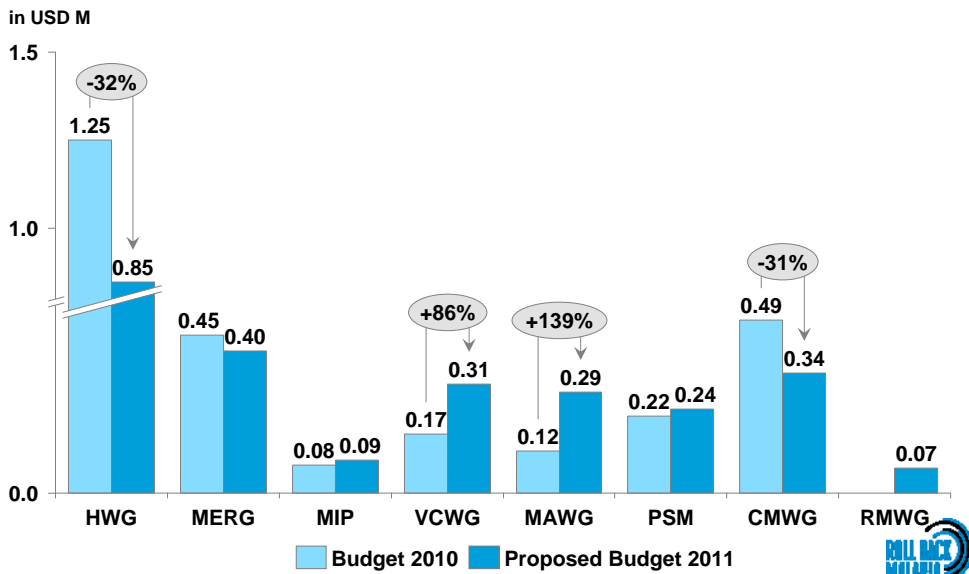
25

Budget spread primarily across staff, travel, consulting, and direct country assistance

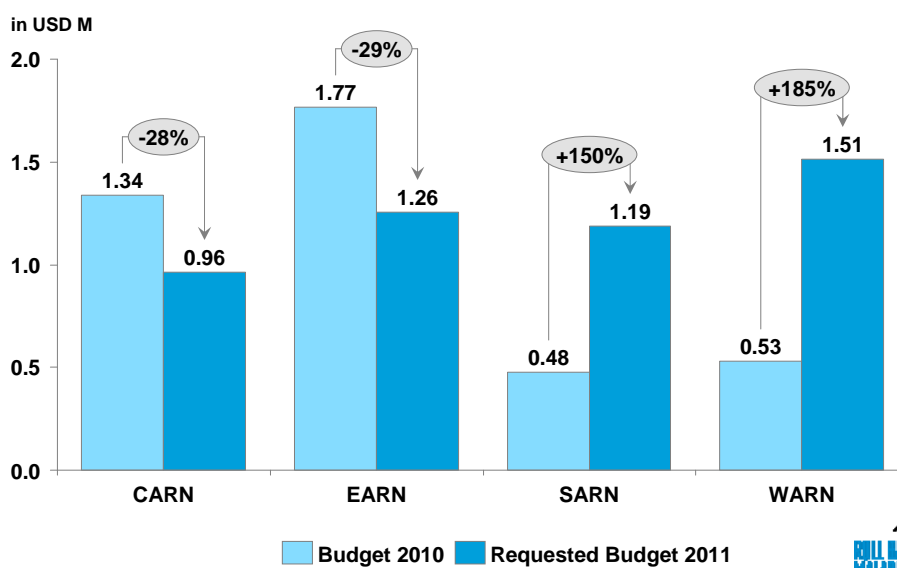


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Working group allocations have changed based on prioritization exercise and absorption capacity

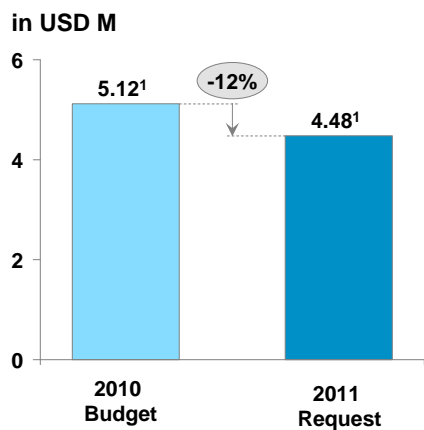


SRN budgets comprised mainly of OGAC and Gates funding that can only be used by SRNs

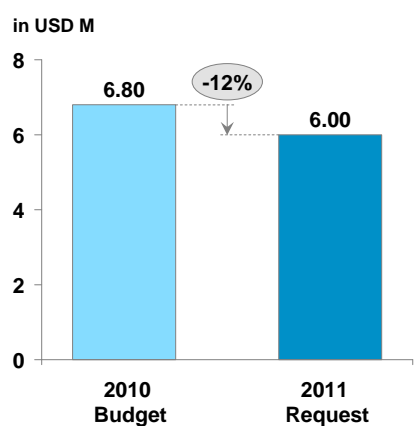


Secretariat has reduced budget for activities and staff in order to provide additional funding for the other mechanisms

Secretariat activities



Secretariat staff

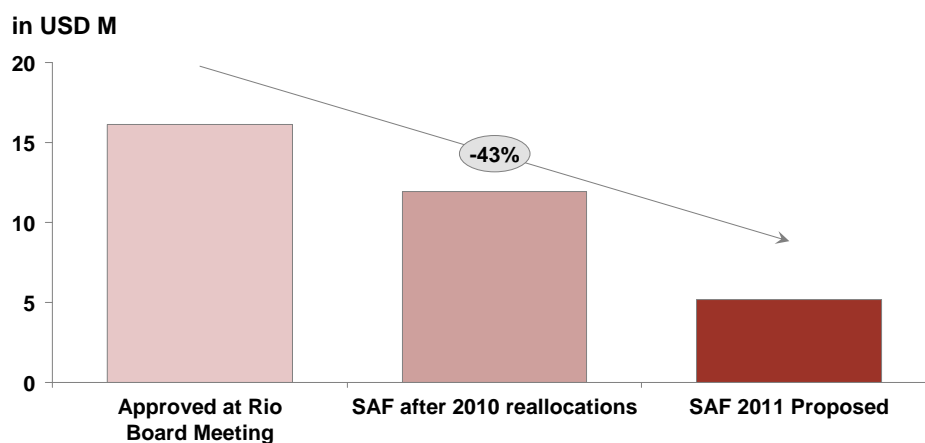


1. Totals include fees to WHO 2. Year to date expenditures as of October 31, 2010



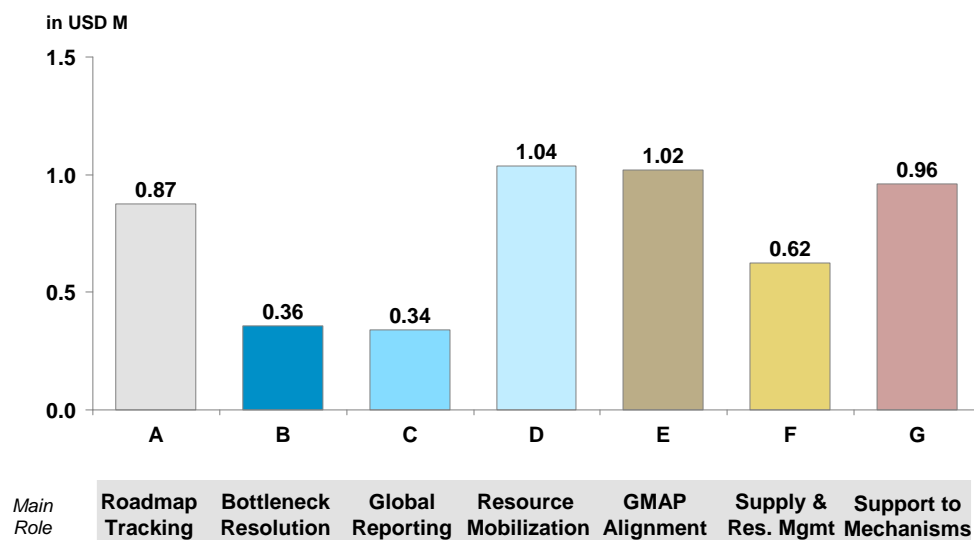
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SAF overview as of the Rio Board Meeting



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SAF activities total \$5.2M and are well distributed across the targets



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Revised PWP and Budget 2011

The Finance work stream of the Finance and Performance Committee has reviewed the proposed PWP and Budget 2011 and recommends it with the following observations:

- Consultative process was used
- Proposed change to the targets remains and it yet to be approved
- Future years will use a different time-line for decision process
- FWS finds budget within limits of available resources
- The FPC/FWS recommends it for approval, subject to Board approval of the revised targets.



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Requested Board Action

The board is requested to:

- Approve the revisions to the structure of the PWP 2011, including the allocation of activities under the old Target G (Elimination) into Targets D, E and F
- Approve the RBM Expenditure Budget 2011 of US\$ 17,996,105
- Note the RBM Supplemental Activity Framework (SAF) 2011 of US\$ 5,213,894 and encourage the Partnership to work towards mobilizing resources to allow implementation of the SAF



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Targets for 2012 (1/2)

- Given :
 - GMAP
 - Current needs within countries based on scientific evidence
 - Performance of all RBM partners vis-à-vis GMAP
 - Available resources

Targets for 2012 (2/2)

Targets/priorities should be developed regarding 3 areas :

- Thematic area
- Impact area/implementation within countries
- Partnership area/Global architecture

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Board decisions were printed and distributed in a Word document to members of the Board



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	Partnership Board Self-Assessment	FPC CO-CHAIR
	Identification of Strategic Issues—For Discussion at the 20th Board Meeting (11-13 May 2011)	Board Chair
	Main Subject of 2011 Ministerial Session—Report on Progress of 2010 Resolution	Board Chair
15.00–15.30	Break	
15.30–16.30	Board Matters (Cont'd)	
	Committee Membership	Board Chair
	Date and Venue of 20th RBM Partnership Board Meeting	Secretariat
	All Other Business	Board Chair
16.30	Closure of the Board Meeting	



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Main subject for Ministerial Session



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15.30–16.30	Committee Membership	Board Chair
	<ul style="list-style-type: none">• Creation of Board Chair Search Committee• Reconfirmation of FPC, EC, 2010 Committee, KM	



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Proposed membership of the Finance and Performance Committee - Finance Stream

	Name	Constituency
Chair	Alan Court	UNSG Special Envoy's Office
Members	Marie Masurel	France
	Kent Campbell	NGOs
	Dr Ren Minhui	PR, China
	Dr Maryse Pierre-Louis	World Bank
	Dr Sergio Spinaci	WHO
	Mikkel Vestergaard-Frandsen	Vestergaard Frandsen



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Proposed membership of the Finance and Performance Committee - Performance stream

	Name	Constituency
Chair	<ul style="list-style-type: none"> • Pr Rifat Atun 	<ul style="list-style-type: none"> • The Global Fund
Membership requests received so far	<ul style="list-style-type: none"> • Mme France Agid • Name TBD • Hans Berg • Kent Campbell 	<ul style="list-style-type: none"> • Ministry of Foreign Affairs, France • Ghana • Shell • NGOs



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Proposed membership of the Executive Committee

	Name	Constituency
EC Chair	• Matt Lynch	• JHUCCP
Voting EC members		
• Malaria Endemic Countries	• Ahmed Mouhamed	• Ghana
• Multilateral Development Partners	• Dr Maryse Pierre-Louis • Renee Van de Weerd	• World Bank • UNICEF
• OECD Donor Countries • Private Sector	• Admiral Timothy Ziemer • Mikkel Vestergaard Frandsen	• United States of America • Vestergaard Frandsen
• Foundations	• David Brandling-Bennet	• Bill & Melinda Gates Foundation
• NGOs	• Halima Mwenesi	• Academy for Educational Dev't
• Research & Academia	• Wilfred Mbacham	• Cameroon
• WHO (Secretariat host)	• Dr Hiroki Nakatani	• ADG HTM
NonVoting ex-officio member		
• RBM Executive Director	• Pr Awa Marie Coll-Seck	
• UNSG Special Envoy's Office	• Alan Court	



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Proposed membership of 2010 Report Committee

	Name	Constituency
Chair	• Alexandra Farnum	• Bill & Melinda Gates Foundation
Members		
	• Suprotik Basu	• Office of the UNSG Special Envoy for Malaria
	• Alan Court	• Office of the UNSG Special Envoy for Malaria
	• Daniel Low Beer	• Global Fund for AIDS, TB and Malaria
	• Dr Robert Newman	• World Health Organization
	• Dr Maryse Pierre-Louis • Jessica Rockwood	• World Bank • Development Finance International, Inc
	• Dr Rick Steketee • Elodie Genest • Prof Awa Coll Seck	• PATH • PATH • Roll Back Malaria Partnership
	• Craig Jagers • Valentina Buj	• World Vision • UNICEF

Note: Brazil has been proposed as an additional new member (Representative TBD)



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Proposed membership of Task Force three (Knowledge Management)

	Name	Constituency
Chair	• Dr Mary Ann Lansang	• The Global Fund
Members	• Kwame Agyarko • Rebecca Stevens • Kathrin Bauer • Valentina Buj • Gabriele Fontana • Halima Mwenesi	• ALMA • Novartis • PSD FOCAL POINT • UNICEF • UNICEF • Academy for Educational Development
	• Samantha Bolton • Claudia Vondrasek • Thomas Teuscher	• WHO/GMP • RBM WARN • RBM Secretariat

Note: Ex Task Force two member to be recruited



55

Proposed membership of the Resource Mobilization Subcommittee

	Name	Constituency
Chair	• ...	• ...
Members	• Admiral Ziemer • Stefan Embladt • Patricia Atkinson • Carol Medlin • TBD • TBD • TBD • TBD • TBD	• US Government • Global Fund • Gates Foundation • Gates Foundation • Private Sector • NGOs • Malaria Endemic Countries • Research and Academics • Multilaterals

Note: Ex Task Force two member to be recruited



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Date and venue of the 20th RBM Partnership Board Meeting

Proposed Date

- May 11-13, 2011 (UNITAID 10-12)

Location

- Montreaux, Vevey, Geneva

Costs

- Similar across all three locations

Secretariat Proposal

- Montreaux

Considerations

- Ministerial Session in Geneva on Friday afternoon



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All Other Business



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RBM Board Task Force on Central Africa

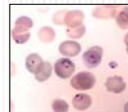
- The RBM Board takes note of lagging progress on malaria prevention and control in Central Africa. Analyses of malaria financing per person at risk, intervention coverage, and health impact demonstrate that the countries that make up the Central Africa Regional Network (CARN) are generally far behind countries in other African sub-Regions.
- There is an urgent need to address this problem if we are to succeed in reaching 2015 GMAP targets and the 2015 MDGs more generally.

- To facilitate this, the Board proposes the creation of a time-limited Board Task Force on Central Africa.
- This Task Force should undertake a comprehensive analysis of the factors that may be responsible for the inadequate progress in the subregion, including, but not limited to: Financing (Global Fund, PMI, World Bank, DFID, and other funding entities); Long-term technical support (from PMI, Unicef, WHO, and other organizations); Political will (high level political commitment at Country level); Technical (appropriate malaria policies and strategic plans); Logistical; Resistance (antimalarials and insecticides); and Health Systems

Proposed membership

- Endemic Countries: Minister José van Dunem, Angola (Chair)
- Multilaterals: TBD
- UN Special Envoy: TBD
- Global Fund: TBD
- Foundations: TBD
- Academia: TBD
- OECD: Jenny Amery, DFID
- Northern NGO: TBD
- Southern NGO: TBD
- Private Sector: TBD

- The Task force is encouraged to interface with relevant RBM Mechanisms, including but not limited to:
 - Knowledge Management Task Force
 - Resource Mobilization Board sub-Committee
 - Harmonization Working Group
 - Procurement and Supply Chain Management WG
 - Malaria Advocacy Working Group
- Suggested that Task Force interface with other relevant entities outside of the RBM Board, including but not limited to ALMA.
- Initial proposed time frame for Task Force is 12 months; decision on whether or not to extend its mandate to be made at December 2011 RBM Board Meeting.



**RBM Board Resolution On the Scaling-up of :
WHO's Revised Recommendations on: Diagnostic Testing for Malaria**

**Presented on Behalf of Endemic Countries by:
H.E. Dr Jose Van Dunem- Minister for Health
Angola**

RBM Board Meeting – Lusaka, Zambia 6 - 8 Dec
2010

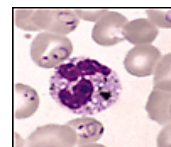


Preamble 1

- The RBM Board welcomes the recommendations laid out in the second edition of the *WHO malaria treatment guidelines (2010)*¹ that prompt parasitological diagnosis, either by microscopy or by rapid diagnostic test (RDT) should be carried out, whenever possible before starting treatment with ACT.

http://whqlibdoc.who.int/publications/2010/9789241547925_eng.pdf

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Preamble 2

- Added advantages of systematic confirmation before treatment are that the inappropriate use of malaria treatments can be significantly reduced, thereby limiting drug pressure which may promote the spread of drug resistance and reduce costs to countries and irrational use of ACTs.
- Reducing inappropriate drug use will diminish the number of people experiencing side effects from these drugs.

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Preamble 2 (Cont)

- Confirming cases of malaria also will greatly improve the quality of the malaria case reporting, providing countries with more accurate information on malaria burden by which to monitor the success of their control programs.
- In addition, use of diagnostic testing for malaria is likely to improve detection and case management of other causes of fever, particularly childhood pneumonia and diarrhea; and other haemo-parasitological infections, when microscopy is used for diagnosis.

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Preamble 3

- The scale-up of diagnostic services now has become more achievable with the advent of good quality rapid diagnostic tests (RDTs) for malaria, which can be used at more peripheral levels of the health system, including at the community level.
- Two rounds of the WHO/FIND evaluation of Rapid Diagnostic Tests for malaria ², and the new *WHO Information note on recommended selection criteria for procurement of malaria rapid diagnostic tests (RDTs)* (Sept. 2010) ³ provide the technical basis and practical guidance to National Malaria Control Programs and other stakeholders on the choice of reliable and accurate RDT's.
- The RBM partnership wishes to support the timely scaling-up of the implementation of these recommendations.

² <http://apps.who.int/tdr/publications/tdr-research-publications/rdt-performance/pdf/full-report-malaria-RDTs.pdf>

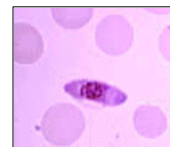
³ http://www.who.int/malaria/diagnosis_treatment/diagnosis/infoRDTinterimcriteria.pdf

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Resolution 1

- **The RBM Board therefore:**

- 1. Encourages the different regional and national RBM platforms** to give proper attention and support to the implementation of the above mentioned WHO recommendations on malaria diagnosis and treatment strategy.
- 2. Encourages governments** to ensure that national guidance conforms with the above-mentioned WHO recommendations, including the position that malaria treatment should be preceded by biological confirmation of the suspicion of malaria, in both the public and private sectors. In addition government should also ensure capacity building for quality assurance for both malaria microscopy and RDTs.



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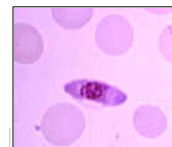
Resolution 2

- **3. Calls upon the donor constituency** to ensure that within their future support for malaria case management, sufficient resources are provided for the necessary equipment and supplies and to support implementation of a high-quality malaria diagnostics services, that includes development of appropriate curricula, standard operating procedures and job aides, training and supervision of laboratory staff, Clinicians and Community Health Workers, strengthening for supply chain management, and establishing comprehensive quality assurance activities for both malaria microscopy and RDTs.
- **4. Encourages relevant partners** to support national malaria control programs in scaling up the implementation of the WHO recommendation to have confirmation of suspected malaria through diagnostic testing before treatment with an ACT.

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Questions!!!!!!



Nineteenth RBM Partnership Board Meeting

Wednesday, December 8, 2010

Time	Agenda item	Presenter
14.00–15.00	Board Matters	
	Partnership Board Self-Assessment	FPC CO-CHAIR
	Identification of Strategic Issues—For Discussion at the 20th Board Meeting (11-13 May 2011)	Board Chair
	Main Subject of 2011 Ministerial Session—Report on Progress of 2010 Resolution	Board Chair
15.00–15.30	Break	
15.30–16.30	Board Matters (Cont'd)	
	Committee Membership	Board Chair
	Date and Venue of 20th RBM Partnership Board Meeting	Secretariat
	All Other Business	Board Chair
16.30	Closure of the Board Meeting	

