

Teleconference Executive committee (ExCom. No 5. 26.01.05) Final Minutes

Attended:	Not able to attend:	Secretariat
Ernest Loevinsohn Mario Raviglione Irene Koek Karam Shah Giorgio Roscigno	Ken Castro	Marcos Espinal Louise Baker Michael Luhan
Minutes on discussions	Decision	Action

01.1 World TB Day 2005

The topic was introduced with reference to the attached background document with an update provided on planning for country and global level communications and advocacy activities.

Focus on front line TB providers in countries and global media events in the UK with JW Lee and Hilary Benn, Canada GDF achievements report, France and Japan.

1.1 Executive Committee agreed with the proposals1.2 Called for simplified messaging for World TB Day:A global reduction in prevalence and death shows that TB is an

investment in aid that works. In Africa the intimate link between TB and HIV is hindering progress. 01.2 Upcoming Coordinating Board Meetings

The dates of the next Coordinating Board Meeting were confirmed as 2-6 May 2005. The location is likely to be Addis Ababa, Ethiopia.

Discussion on agenda for CB meeting included establishment of a Committee to Elect a New Chair in the autumn, Heads of State/EU Strategy, FIDELES, Global Plan 2, Annual Report 2004 and an invitation to Richard Feacham to present.

The dates for Autumn Board Meeting are being discussed with Italy.

- 2.1 Ex. Committee approved these items for inclusion and requested presentation on public private mix standard of care, Working group updates, High Level Missions
- 2.2 Ex Committee support the Beijing Format but will approve format after presentation of agenda.
- 2.3 Include High Level meetings with State Secretary, African Union, Economic Commission for Africa etc.
- 2.4 Hold special session "Focus on Africa" to make plans for intensified support; attended by AU and Commission for Africa etc.
- 2.4 The ratio of decision making to information points on the agenda should be high.

- 2.1 Confirmation on location by 28th January to CB members <ME>
- 2.2 In the next few weeks, circulate Draft Agenda <ME> 2.3 Finalize dates for the Autumn meeting and communicate these to the Board.<ME>

01.3 Vice Chair of the Board



The reassignment of the Sec. Health Pakistar	n leaves the position of Vice Chair of	
2 positions will need to be filled. Representative from the EMRO Region and Vice Chair. The process needs to be transparent and open and draw on the democratic process that was implemented last year. The Executive Secretary proposed to nominate and appoint the runner up of the last election, held in Beijing.	3.1 The Ex Comm agreed new Sec. Health Pakistan should be requested to take over the EMRO position. 3.2 The Ex Comm decided that input and consensus from the Board was need to appoint the new Vice Chair.	3.1 Write to new Sec. Health Pakistan to offer the position of EMRO on the Board. <me> 3.2 Contact Sec. Health DRC re. Vice Chair position.<me> 3.3 Write to the Board and request feedback on 2 options - nomination of runner up or new election. <me></me></me></me>
01.4 High Level Missions		
The Coordinating Board had requested a doc level missions.	ument to be used as the guiding prin	ciples for the facilitation of high
The Executive Committee endorsed the High Level Missions Guiding Principles paper and welcomed the structuring of planning for High Level Missions.	4.1 Add "wherever possible that technical review should take place prior to a HLM" in the preparation section 4.2 Add that HLM should not be restricted to failing countries - any country that required encouragement could be visited. 4.3 Agreed planning for HLMs should include and prioritize meetings with international bodies such as the EU and NEPAD.	4.1 Update HLM Guiding Principles document and circulate to the entire Board. <gs>. 4.2 High Level Missions to be discussed at the CB meeting in May<me>.</me></gs>
01.5 Other issues		
(a) Advocacy and Communications Working Group The Ex. Comm was updated on progress towards this meeting to be held in Geneva from the 7 th -9 th February 2005.	N/A	N/A
(b) Donor Rotation/staggering USAID presented a proposal to rotate donor representation at the next Coordinating Board meeting.	5b.1 Ex. Committee members agreed that donors should rotate off the Board to encourage new donors to participate. 5b.2 USAID mentioned the possibility that they could rotate out, as per the principles of the donor constituency. Committee members expressed concern and requested USAID to reconsider their position at this time as the Ex Comm considers it vital that active and committed donors (such as CIDA and USAID) are	5b.1 Chairman of the Board to discuss this issue with Irene Koek (USAID) directly. 5.b.2 The wider donor community to start discussions on an acceptable mechanism for rotation among members.



Stop TB Coordinating Board Executive Committee

on the Board. The Japanese representative could also rotate and be afforded observer status.	