

Teleconference Executive committee (48 Ex Comm. – 14 November 2013) (Draft) Minutes

| Attended: | Apologies: | Secretariat | |
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| Joanne Carter (Vice Chair) Michael Kimerling Erika Arthun Austin Obiefuna Natalie Garon Sara Nicholls Mario Raviglione Aaron Oxley Cheri Vincent | Thokozile Phiri-Nkhoma Paula Fujiwara | Lucica Ditiu Shirley Bennett Young-Ae Chu | |
| Minutes of Discussion | | Outcome | |
| Date for the Board pre-brief TB Affected Country seats: Two representatives from T of which two seats are vaca Health South Africa has been Agenda: | | Fown ofessional opportunities as a result puntries is vacant as the Minister of | |
| Interpretation Venue and logistics Interpretation Interpretation Interpretation Venue and logistics The Secretariat explored nine hotel options for the Cape Town Board meeting. Six were unavailable, had unsuitable (not large enough meeting spaces or were too expensive for per diem rates. The Secretariat is working to finalize a contract with the selected venue. | | <u>Venue and logistics</u> The Executive Committee welcomed the update on the planning for the upcoming Board meeting | |
| 2. <u>Date</u> There was a discussion when the Ex meeting in Cape Town and how mu briefings. | ecutive Committee should hold a face-to-face | <u>Date</u> Executive Committee to hold a face-to-face meeting on | |

Stop B Partnership

3. <u>TB Affected Country Seats</u>

Executive Committee recognized representatives from TB Affected Countries may change frequently given changes in political situations at country level. The Executive Committee felt it important that representatives from TB Affected Countries be from a geographical range of countries. It was suggested representatives from additional identified priority countries be invited to Board meetings as observers so there is a range of political individuals involved with the Board that could potential become Board members.

4. <u>Agenda</u>

The Board recognized the agenda of the Cape Town meeting looks almost full. The usefulness of reaching out to all Board members to identify additional agenda items seemed questionable as it may not be possible to accommodate all suggestions at the Cape Town meeting.

There was a discussion which of the agenda items should be covered in the prebriefing.

TB Affected Country Seats

- Vice-Minister of Health Mozambique should be invited to be a Board member representing TB Affected Countries.
- The Executive Committee requested the Secretariat submit via email, the shortlist of potential representatives of TB Affected Countries which was used in mid-2013 to identify Board representatives (as well as any additional suggested countries)
- Board representatives of TB Affected Countries to be discussed at the next call of the Executive Committee.

Agenda

The Executive Committee agreed:

- The host country session to include TB and mining, the joint TB-HIV review and BRICS.
- The Work Plan 2014-2015 and report of the Finance Committee should be included as part of the Report of the Executive Secretary to the Board and the duration of that session extended to 90 minutes.
- The new Global Plan should have enough time for discussion at the Cape Town meeting.
- The pre-briefing should include agenda items requiring a decision at the Board (Work Plan 2014/2015, hosting, Global Plan)



| 2. Global Plan 2016-2020: Update | |
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| The Executive Secretary updated the Executive Committee on the development of the | e Global Plan 2016-2020. |
| The Secretariat has a budgetary gap for developing the Global Plan 2016-2020. Conversations have been had with current donors about funding the development of the new Global Plan. The Executive Committee discussed the need to diversify the donor base. The Executive Committee discussed the essential work that developing the Global Plan to Stop TB is and to be given enough time on the Board agenda in Cape Town. | Secretariat to develop detailed plan on the development of the Globa Plan 2016-2020 with the budget gap articulated clearly. The Executive Committee to discuss again at its next call. |
| 3. Kochon Prize | |
| The Executive Secretary provided an update on the reasons leading to the postponer Prize. | ment of awarding the 2013 Kochon |
| Given the postponement it is proposed to award the 2013 Kochon Prize at the Board meeting in Cape Town, South Africa. | • Executive Committee discussions to continue via email. |
| 4. TB situation Room | |
| The Executive Secretary provided a summary of progress to date. | |
| After several discussions taking place since 16 April 2013, on 18 November 2013, a consultant will start at the Global Fund as part of the TB Situation Room. The Executive Committee discussed briefly modus operandi, enlargement of the Steering Group, interactions with TBTEAM and other partners. | By 5 December 2013 Secretariat to provide to the Executive Committee recommendations on how the TB Situation Room and Steering Group will operate and additional capacity of engagement needed. In agreement with Globa Fund and TB TEAN Secretariats to develop or most relevant metrics for success in preparation for the Cape Town Board meeting. |
| 5. Hosting Arrangements of the Stop TB Partnership Secretariat | |
| The Vice-Chair of the Board provided an update, and had sent a draft scope of v reviewed by the EC and initial funding is identified, the VC and EC can move forwa develop a revised timeline and message to the full board. It is hoped that a first ph for hosting, building on the prior work, can be provided for the Cape Town Board me | rd in securing the consultancy and ase analysis of the overall options |





| Work for one or more consultancies to take the hosting work forward, which will be overseen by the Executive Committee. The assessment of further hosting options and landscape should include the option of the Secretariat remaining hosted by WHO. | • | members to email the Vice- Chair any comments on the scope of work by close of business 19 November 2013. The Vice-Chair will follow up with the Executive Secretary and relevant donor partners on funding issues for the consultancy. |
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