

Board Meeting Note for the Record

Saturday 21 April, 2007





Chair: Kul Gautam

The Chair listed three objectives for the day's discussion: a) assess how the Partnership and Secretariat are performing, b) determine whether the Secretariat receives sufficient support from the Board, and c) determine options for moving forward with the PMNCH Gates grant. The agenda was approved as circulated.

Item 1. Report from the Secretariat

Presented by: Francisco Songane, Director

Document: "Director's Report"

Main points covered in the presentation

- Some of the main achievements of the last year are: Ten-Year Strategy and Partnership Work Plan endorsed, first Partners' Forum held, resources mobilized, high-level advocacy efforts initiated, work on the Global Business Plan for MDGs 4 and 5 initiated, Partnership's image created, and Secretariat staff hired.
- Some of the challenges highlighted by the Director included: defining a systematic approach
 to work in countries in line with the Partnership's core principles, messaging around the
 continuum-of-care concept, striking an appropriate regional balance in our work, improving
 communications amongst partners, and building credibility based on achievements.

Discussion points

- The website needs to be interactive and more dynamic and should include: FAQs to address
 the value-added dimension of the Partnership and the respective roles of the partners and
 the Secretariat, links with partners' websites, and a "forum" for partners to communicate their
 work in MNCH.
- All partners need to improve communication within their own organizations on their role in the Partnership at country level. Also, partners and the Secretariat need to find effective ways of working together so that objectives are reached. Clear roles and responsibilities need to be determined so that accountability may be ensured.
- Members of the Partnership should find ways to ensure that the Secretariat has the resources, both financial and human, to carry out its mandate.
- Engagement with countries should include civil society groups, health care professional organizations, academic/research institutions and NGOs, so that these groups are included in the planning of national programs.
- In future, the Director's report should include summaries of recommendations and decisions
 arising from previous meetings, and information on their implementation status. It should
 also differentiate what partners are doing under the umbrella of the Partnership from what the
 Secretariat is doing. Finally, it was noted that the report was distributed the day before the
 meeting, and should in future be circulated at least one week in advance.



Item 2. Membership and Rotation

Presented by: Ann Starrs, Co Chair

Documents: "Aspects of PMNCH Governance - Memberships and Board Rotation"

"List of iSC Members, updated April 19/07"

Discussion points

- Criteria for Partnership membership should include making a pledge (although non-binding) to work within the principles of the Partnership, including especially: (p 14, Conceptual and Institutional Framework)
 - Supports countries' leadership role, respecting national needs, plans and institutions
 - Encourages partners to speak with one voice and promotes the continuum-of-care
 - Helps to ensure a systematic approach to country support
- The process for screening new membership applications should be defined and included in the Conceptual and Institutional Framework
- Selection by Working Groups of their respective chairs and co-chairs was managed with transparency and openness during the Partner Forum. In future, it may be desirable to apply a uniform process across all Working Groups with a view to harmonization.
- Kul Gautam announced his decision to step down as Chair.

Decisions

- 1) Effective immediately, the "interim Steering Committee" will be known as the Board. Further, the "interim" period is now completed.
- 2) Currently-serving Board members were confirmed.
- 3) Board members will serve for a term of two years, starting April 2007, renewable once. Rotation will apply to all constituency groups, except the UN agencies which do not rotate.
- 4) Language on membership criteria will be revised and re-circulated for endorsement on a non-objection basis. (Action: Secretariat)
- 5) Chairs and co-chairs for Working Groups were endorsed as follows:

WG on Effective Interventions: Mason, Islam, Bhutta (3 co-chairs)

WG on M and E: Hussein for Graham (co-chair to be identified)

WG on Advocacy: Pinel (Chair), Oluwole (co-chair)
WG on Country Support: Bartlett (chair), Terreri (co-chair)

- 6) An Ad-Hoc Governance Committee, consisting of Ann Starrs (Chair), André Lalonde, Julia Hussein, Pascal Villeneuve, Fran McConville, Ruth Calderon, with support from the Secretariat, was established, with the following Terms of Reference. The Committee will report back by June 21. The Committee should consider consulting with an expert on governance.
- a) develop a nomination process for election of a new Board Chair
- b) establish a process through which Partnership membership applications can be screened



c) review the election process carried out by the Working Groups (during the Partner Forum) and develop a single voting process for election of chairs and co-chairs to be used in the future

Item 3a. Secretariat 2006 Financial Report

Presented by: Sonya Rabeneck

Document: "Interim Financial Report for 1 January 2006 to 31 December 2006"

Main points covered in the presentation

- This interim report provides the figures available to the Secretariat from WHO for 2006. A report on the biennium (2006/2007) will be presented at the April 2008 Board meeting.
- The Secretariat had an opening balance on 1 January 2006 of \$1,154,717; income during the year from six donors amounted to \$17,112,849 (includes the Gates grant), \$21,067,960 including all pledges. Expenditures were \$1,325,069. The duration of grant agreements ranges from six months to four years.

Discussion points

- In the future, travel of Secretariat staff and travel support provided by the Secretariat to non-staff should be differentiated; expenditures should be shown *by activity* and linked to Work Plan achievements; and, staff versus non-staff expenditures should be separated.
- Gates grant funds for country support activities should removed from the Secretariat budget because this \$25m portion (of the \$35m total) is managed by a Management Committee, chaired by the WHO.

Decision

The 2006 Interim Finance Report will be revised and re-circulated, with the following four changes: (Action: Secretariat)

- a) Secretariat travel differentiated from non-Secretariat travel
- b) Gates grant funds for country support removed
- c) the DFID contribution during 2005/2006 clarified
- d) Secretariat organigram attached

Item 3b. Secretariat 2007 Work Plan

Presented by: Flavia Bustreo, Deputy Director **Document:** "Secretariat 2007 Work Plan"

Main points covered in the presentation

- This Work Plan is organized according to the eight Strategic Objectives of the Partnership, which are grouped into four areas: country support, global advocacy, aligning partners, monitoring progress. Governance tasks are also included.
- Two Working Groups (Effective Interventions, M and E) were not operational during the preparation of this Work Plan so detailed input from these was not possible.



- Some of the activities in the Work Plan build on work initiated last year (e.g., the Global Business Plan), other activities are new (work on health systems strengthening). Detailed costings for each activity are available from the Secretariat.

Discussion

- The Secretariat should inform Board members of country visits so that partners in countries can be informed and mobilized.
- Additional information on how each of the activities will be achieved would be helpful, as well as clear delineation of what the Secretariat will do and what the partners will contribute. This can be incorporated into the 2009 Work Plan.
- Consideration needs to be given to improving the regional balance of the Partnership's work, especially in Asia and Latin America.
- It was suggested that a small ad hoc committee be formed for the development of the 2008 Partnership Work Plan. This Work Plan will delineate activities that are in line with the Secretariat's roles and responsibilities, and added-value activities which fall under the responsibilities of partners based on their comparative advantages. Norway offered to support the Partnership in this exercise through consultant services. This offer was gratefully accepted.
- Norway also offered to provide funds to the Secretariat for work in three additional areas: a) building the evidence base around the concept of the continuum-of-care for MNCH, b) support for the creation of partnerships in countries which have a major role in building local advocacy capacity; c) support for the creation and establishment of an interactive PMNCH website. This offer was gratefully accepted.

Decisions

- 1) Suggested changes to the 2007 Work Plan should be communicated to the Secretariat by May 12. (Action: Board members). The Secretariat will revise accordingly. (Action: Secretariat)
 - 2) The Work Plan was approved in principle, with the \$7.5m Gates grant contribution removed, and Board members' comments taken into account. (Action: Secretariat)
- 3) For the 2008 Work Plan a small <u>Ad Hoc Work Planning Committee</u>, which will include representatives of the constituencies, will support the Secretariat in developing a value-added Partnership Work Plan. (Action: Secretariat)

Item 4a. Implementing PMNCH work at country level - the value added approach

Presented by: Al Bartlett

Document: "Operationalizing Country Support"

Main points presented by Al Bartlett

- The rapid time-line for implementation of the Partnership grant took up most of the Working Group's efforts during the past several months.
- With key staff now hired in the Secretariat the priority is to develop a structured process of engagement with countries, which is catalytic and adds value.



- The concept of country clusters was introduced by the Working Group, to draw upon expertise at country and regional levels.

Discussion

- The document "Operationalizing Country Support" should include sections on mobilizing resources, effective ways to engage civil society groups in planning processes at country level, how to provide high-quality technical support on a demand basis, and how to help countries address operational bottlenecks.

Decisions

- 1) The core membership of the Country Support Working Group will remain 12. (Action: Secretariat and Chair, Co-Chairs of the WG)
- 2) The paper on "Operationalizing Country Support" will be circulated to Board members once more for comments, due on May 14. (Action: Secretariat)

Item 4b. Implementation of the PMNCH Gates Grant

Presented by: Mamadou Diallo

Document: "Consolidated Report on Work in Three Countries"

Points raised during the presentation

- The outcome measure in Malawi, Mozambique and Burkina Faso is to achieve at least 25% reduction in child mortality in 3 years.
- Achievements to date include establishment of a local core team in each country to prepare an implementation plan. For countries to access funds, the core team must show how funds will be used to achieve impact.

Discussion

- Partners in the field, not Board members, should address implementation problems together with governments.
- There have been some concerns regarding the timing, top-down approach, and lack of involvement of all partners in the initial country visits.
- Country visits, and country facilitation in general, should adhere to the principles of the Partnership, and the Paris Declaration and should follow the OECD/DAC good practice guidance for integration and effectiveness of global programs at the country level. The Partnership is not meant to be directly involved in implementation. The aim of the grant is to "buy success".

Decisions

1) Effective immediately, the implementation of the \$25m portion of the PMNCH Gates grant is "on hold" for a maximum period of three months. The implementation of the \$10m portion, which provides support to the Secretariat, continues as originally foreseen in the grant agreement.



- 2) An <u>Ad Hoc Grant Committee</u> (Dan Kraushaar, Stewart Tyson, Liz Mason, Anne Tinker, Al Bartlett, Flavia Bustreo) will examine the following four options, and report back to the Board with a recommendation by June 11:
- a) maintain grant management as it is now
- b) return the funds to the Foundation
- c) re-define how the grant is managed, strengthening partnership constituencies at country level and based on the continuum-of-care concept
- d) disburse funds through a different mechanism

Item 5. Global Business Plan for MDGs 4 and 5

Presented by: Tore Godal, Senior Advisor to the Prime Minister of Norway

Document: "GBP Meeting Report London January 2007"

Dr. Godal referred to his presentation to the Partner Forum, which was well received. The draft GBP for MDGs 4 and 5 Concept Paper will be distributed by Norway by mid May to Board members for their review and comments, due June 1, 2007.

Decision

The Board endorsed the GBP for MDGs 4 and 5 concept.

Item 6: Ideas for enhancing internal communications – brainstorming

Facilitated by: Flavia Bustreo

Main points raised

- The Partnership experienced considerable growth over the past year, and this trend continues. The communication challenges are at three main levels; amongst partners, amongst Working Groups and partners, and between Secretariat and the Board membership.
- Various enhancements to the website are under consideration; the site should be interactive with content on partners' work at country level, key media pieces, reference documents and Working Group activities. A community of practice model, and share point access, is one approach.
- An informal, monthly E-mail bulletin will be distributed to Board members covering planned and recently completed activities and other informal information. The aim will be to ensure that Board members are informed about what the Secretariat is doing, and to maximize opportunities for synergy and communication. The more formal *Update*, with pictures and logo, which has a Partnership-wide distribution, will continue.
- Board members should avoid "reply all" responses whenever possible. Board meeting dates should be set as far in advance as possible, and Alternates designated when Representatives cannot attend.



Item 7: Any other business

Main points raised

- The Board should consider inviting representatives from other global health partnerships to Board meetings as observers to enhance collaboration and share lessons learned.
- The importance of improving country representation on the Board was emphasized, the participation of the Bolivian delegation recognized with thanks, and the Representative of Senegal was thanked for his interest and participation as observer in the Partner Forum.
- Board members expressed their sincere appreciation to Kul Gautam and Joyce Thompson, who steps down as representative of the International Confederation of Midwives, for playing a critical role in the initial years of the Partnership.

Item 8: Closed Session

Note for the Record circulated by the Chair

Item 9: Next meeting

The next meeting of the Board will be November 28 and 29. Venue to be determined.

Meeting Closure.



PARTICIPANTS

Representatives

Bill and Melinda Gates Foundation

Bangladesh Rural Advancement Commission

CIDA **DFID**

Family Care International Government of Bolivia Government of Ethiopia

International Federation of Obs/Gyn

IPA Norway

Save the Children

UNFPA UNICEF UNICEF USAID World Bank

Expert, Maternal Health Expert, Child Health

Alternates

CIDA **DFID** Government of Bolivia

International Federation of Obs/Gyn

Norway

Save the Children

UNFPA WHO WHO

Observers

Government of Germany Government of Senegal

Secretariat, ex Officio

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Joyce Thompson Andre Lalonde Jane Schaller Tore Godal Anne Tinker

Rogelio Fernandez-Castilla

Kul Gautam (Chair) Pascal Villeneuve

Al Bartlett

Sadia Chowdhury Daisy Mafubelu Julia Hussein Jennifer Bryce

Geeta Khosla Fran McConville Bertha Poolev Kathy Herschderfer

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