

**Teleconference Executive committee (49 Ex Comm. – 05 December 2013)  
(Draft) Minutes**

<b>Attended:</b>	<b>Apologies:</b>	<b>Secretariat</b>
Joanne Carter (Vice Chair) Nathalie Garon Paula Fujiwara Michael Kimerling Austin Obiefuna Mario Raviglione Cheri Vincent	Aaron Oxley Thokozile Phiri-Nkhoma	Lucica Ditiu Shirley Bennett Young-Ae Chu
<b>Minutes of Discussion</b>		<b>Outcome</b>
<b>1. TB Affected Country representation on the Stop TB Partnership Coordinating Board</b>		
<p>There are six seats on the Stop TB Partnership representing TB Affected Countries. Currently four seats are filled with representatives from Brazil, India, Mozambique and Myanmar. The Secretariat sought guidance on which countries should be invited to the upcoming Stop TB Partnership Coordinating Board meeting</p>		
<p>The Executive Committee noted that country representatives should be invited as observers to the next Board meeting, from which future Board representation could be drawn. The Executive Committee agreed that it is important representation be from a geographical range of countries. . Based on the analysis conducted during the governance reform in mid-2013 for selected representation of TB Affected Countries, the Executive Committee identified Cambodia, DRC, Ethiopia and Nigeria as countries that would represent a geographical range as well bring something to the table during discussions.</p> <p>Members of the Executive Committee offered to connect to support the invitations to the Board meeting.</p> <p>The Executive Committee also agreed that the representatives from France and Germany should also be invited to the Stop TB Partnership Coordinating Board meeting in Cape Town.</p>	<ul style="list-style-type: none"> <li>• Invitations should be issued to representatives from Cambodia, DRC, Ethiopia and Nigeria.</li> <li>• Representatives from France and Germany should also be invited to the next Board meeting.</li> <li>• Secretariat to prepare invitations.</li> </ul>	
<b>2. Agenda for the 24<sup>th</sup> Stop TB Partnership Coordinating Board meeting, Cape Town, South Africa</b>		
<p>The Secretariat introduced the draft agenda.</p>		
<p>The Executive Committee welcomed the draft agenda. The Executive Committee felt that topics should come to the Board for decision and not only for information. Topics which are for information should be included in other sessions during the pre-briefing.</p> <p>The Executive Committee agreed the following changes should be made to the draft agenda:</p>	<ul style="list-style-type: none"> <li>• Secretariat to make the changes to the draft agenda of the 24<sup>th</sup> Stop TB Partnership Coordinating Board meeting.</li> <li>• Secretariat to draft the agenda for the pre-briefing</li> </ul>	

<ul style="list-style-type: none"> <li>• The following sessions should be extended to two hours: (i) Report of the Executive Secretary including the Work Plan 2014/2015 and financial overview of the Stop TB Partnership; (ii) Stop TB Partnership Hosting Arrangements; (iii) the Global Plan 2016-2020; and (iv) the Global Fund.</li> <li>• To accommodate this, the session on Branding could be moved to the pre-briefing.</li> <li>• The issue of waiting lists for MDR-TB treatment will be covered either as part of the Executive Secretary's session and/or during the pre-briefing.</li> </ul>	<p>for discussion at the next Executive Committee call.</p>
<p><b>2. Global Plan to Stop TB, 2016-2020</b></p>	
<p>The Secretariat provided background on a draft work plan and budget for developing the new Global Plan to Stop TB, 2016-2020, which was very well received by the Executive Committee. There is currently a large resource gap for producing the Global Plan. Discussions are underway with current Stop TB Partnership donors about funding the development of the Global Plan.</p>	
<p>The Executive Committee asked whether additional savings could be made and what is the minimum amount needed for developing the new Global Plan. The Executive Secretary clarified that a minimum of USD 800,000 is needed but this would mean very limited country involvement. This would lead to a weaker final product which is very different from the one envisaged by the Board at its Ottawa meeting.</p> <p>It was also noted that other similar global plans are being developed at similar or even high costs (Roll Back Malaria is currently developing their version of the Global Plan and have a budget of approximately 3million for its development).</p> <p>There are three options for overseeing the development of the Global Plan: (i) the Executive Committee; (ii) the Executive Committee plus, which would include countries and academia for example currently not on the EC; or (iii) a separate group.</p>	<ul style="list-style-type: none"> <li>• The Executive Committee asked the Global Plan be discussed at their next call including the oversight structure.</li> </ul>
<p><b>4. Hosting Arrangements of the Stop TB Partnership Secretariat</b></p>	
<p>The Vice-Chair of the Board provided an update. Initial funding has been identified for the consultancy. It is expected that by the Cape Town board meeting, lessons learned from other mechanisms such as GAVI and the Global Fund separating from their host institutions should be ready, as well as a refined criteria for the decision on where the Stop TB Partnership should be hosted. Further hosting options will be refined</p>	
<p><b>5. Any other business</b></p>	
<ul style="list-style-type: none"> <li>• Victor Ramathesele has been selected to provide support to the Minister of Health, South Africa as Chair of the Stop TB Partnership Coordinating Board.</li> <li>• During the week beginning Monday 9 December 2013, Victor Ramathesele and the Vice-Chair of the Board will be in Geneva to meet with Stop TB Partnership Secretariat to discuss key issues as well as arrangements for the upcoming Board meeting in Cape Town, South Africa.</li> </ul>	