Stop TB Coordinating Board
Executive Committee

Teleconference Executive committee (25 Ex Comm. -- 30 July 2009)
(Draft) Minutes

<table>
<thead>
<tr>
<th>Attended:</th>
<th>Not able to attend:</th>
<th>Secretariat</th>
</tr>
</thead>
</table>
| Irene Koek (Chair)  
Jeremiah Chakaya  
Mario Raviglione  
Giorgio Roscigno  
Peter Small  
Jean François de Lavison | Ken Castro | Marcos Espinal  
Louise Baker  
Anant Vijay  
Alan Esser |

Minutes of Discussion | Decision | Action |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. HIV TB AFRO Regional Committee Brainstorming</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The Secretariat briefed the Executive Committee on the upcoming special session on TB during the 59th African Regional Committee (RC) Meeting in Kigali, Rwanda in late August-early September and noted that this was a tremendous opportunity to engage Ministers from high burden countries in Africa on TB/HIV and MDR-TB. During the RC, it may be possible to hold separate bilateral meetings with ministers and delegations.

The Executive Committee went through the prospective members from the side of the Partnership and other key partners:
- Chakaya, Jeremiah (TBC)
- Espinal, Marcos
- Nyirenda, Carol
- Raviglione, Mario
- Roscigno, Giorgio
- Sampaio, Jorge
- Sidibe, Michel

The Executive Committee also discussed which countries should be targeted for bilateral side meetings.

The 9 high burden countries in the region should be targeted. Other criteria to assist in categorizing countries include difficulties in the TB response, and UNITAID project participation (and in particular how this can support the response to MDR).

WHO to provide a list of Ministers of Health to be contacted by the HLM and to develop rationale for the meetings and objectives.


The Secretariat provided an update on the work planning process. The Partnership follows WHO processes for preparation of biennium work plans and budgets, with a number of internal deadlines occurring throughout the summer to ensure timely completion of the plans by the Fall.

It was discussed that the plan will be presented to both WHO and the CB for approval in the Fall. This is the first time the Partnership will be outside of the WHO programme budget, as a result of which the Partnership’s budget ceiling will be more flexible in terms of resource mobilization. The Secretariat also briefed on expected income, ongoing grant agreement negotiations, and future targets for further funding raising.

There were no decisions related to this agenda item.

The Partnership Secretariat to continue formulation of the plan according to WHO processes and timelines and to present the plan at the 17th Coordinating Board meeting on 5-6 November 2009. As before, the plan will indicate two cost perspectives: one for fund raising purposes and the other for budgeting purposes based on firm pledges by donors for the biennium (2010 - 2011).
### 3. Global Drug Facility - Update following Pacific Health Summit

Following the Pacific Health Summit, an update was provided on GDF activities, including a stakeholder consultation being organized by the GLC prior to the MDR-TB Working Group meeting, as well as the report on MDR-TB medicine supply challenges and opportunities.

### 4. MDR-TB Update

| WHO provided a briefing on the current status of high burden MDR countries following the Beijing meeting and the WHA resolution. WHO has plans to assist all 27 MDR high burden countries and noted that the MDR-TB working group meeting in October will be an important opportunity to follow-up with all countries on progress. |
| The Executive Committee requested that regular updates (monthly) be provided via a webpage providing progress by country in control of MDR, e.g. plan development, implementation, infection control policy, and lab strengthening. |
| WHO to begin preparation of the webpage to provide public access to regular updates on progress in control of MDR. |

### 5. Global Fund - Update on the Partnership Constituency

| The Secretariat provided an update on negotiations and the agreed rotation schedule and roles within the new Partnerships’ Constituency (Stop TB, RBM, UNITAID) of the Global Fund Board. Three options were also shared regarding communication, coordination and harmonization within the constituency on positions to take at Board meetings: 1.) consultation with the full Executive Committee once GFATM Board agenda and documents are available; 2.) consultation by one Board member from each of the three Boards and all of the Executive Secretaries to harmonize approaches; and lastly, 3.) full delegation of authority to the Executive Secretary to discuss and harmonize with the Executive Secretaries of the other two partnerships. |
| The Executive Committee discussed the various options and noted that there may be a need to hold internal discussions prior to reaching consensus with RBM and UNITAID. |
| With an understanding that inputs from RBM and UNITAID are still pending, the Executive Committee expressed its preference for option 1, whereby the Secretariat would share the agenda and documents with the full Executive Committee for comment and feedback. |
| Secretariat to communicate this to RBM and UNITAID Secretariats as the current preference of the Stop TB Partnership. |

### 6. 17th Coordinating Board Meeting

| The dates, venue and potential agenda items for the 17th Coordinating Board meeting (5-6 November 2009, Geneva, Switzerland) were presented by the Secretariat. |
| The Executive Committee discussed the possibility of using the Rio Forum and recommendations produced by Partners at it to provide a springboard to launch into discussions on greater engagement by civil society in the Partnership. |
| No decisions were related to this agenda item. |
| Secretariat to present detailed agenda for the 17th CB at the next Executive Committee teleconference (18 September 2009, 4PM CET) |

### 7. Any Other Business

None.