Development of Global Plan 2016-2020

Stop TB Coordinating Board

31 Jan 2014
Global Plans to Stop TB

• Roadmap for global progress
• Benchmark for countries and partners
Coordinating Board decision in July 2013

23rd Coordinating Board Meeting
Ottawa, Canada
Decision Points

New Global Plan to Stop TB (2016-2020):
Process for Development

Decision Point: 23-8:

The Board:

• Approves initiation of the development of the next Global Plan by the Partnership, according to the process proposed.
• Notes that the plan needs to be developed based on, and in alignment with, the strategy being developed by WHO, and in close coordination with all stakeholders and Partners.
• Calls on the Secretariat, with support from the Executive Committee and the Coordinating Board, to mobilize the needed financial resources for this activity.

Date: 12 July 2013
• 4. REQUESTS the Director-General:
    ...... to work with Stop TB Partnership, including active support of the development of the Global investment Plan ............
Focus of the Global Plan

• During 2016-2020, how much progress will be made globally towards the post-2015 targets (which are longer term)
• How these targets will be achieved at global level
  – What needs to happen in countries of different epidemiological and programatic settings to achieve the targets
• How much it will cost
  – For implementation of prevention and care
  – For research and development of new diagnostics, drugs and vaccines
Components of the plan

Executive Summary

Introduction

Current status with respect to 2015 targets

Post-2015 targets and strategy

Part 1: Implementation (pillar 1 and pillar 2 of the Strategy)

Part 2: Development of new tools

Budget

Detailed Targets and Indicators

Annexes: assumptions used, basis of the analytic work, etc.
Process of development

• CB Steering Group - Time limited
• Project management done within Secretariat; contract out - Coordinator of process, a writer
• Costed pipelines for new diagnostics, new drugs/new drugs combinations and new vaccines
• Costed implementation plan (including innovative thinking for use current tools, implementation research, and roll out of new tools)
  - Up to 10 “country” profiles – each having 2-3 costed models of scaling up different combination of interventions in order to reach the global targets
  - Up to 10 “regional” profiles
    • Aggregated summary of the above
    • Selected regions will be based on a combination of different parameters (i.e., burden, income, geo-political localization, health system and centered around common challenges)
• Stakeholders consultation
• Civil society and affected community consultation
• Comments invited on the web with a close to final draft
• Endorsement of the Board and Launch
Timeline

Mar 2014: start

Mid-2014: Country consultations and missions
Regional consultations

Early 2015: Stakeholder consultation
Civil society and affected community consultation

Mid 2015: Draft for inviting comments on the web

Sept 2015: Endorsement by Stop TB Board

October 2015: Launch
## Organizational Capacity & Budget

<table>
<thead>
<tr>
<th>1. Steering Committee</th>
<th>Lay the foundation and provide overall guidance on the Plan’s directions – ToRs, deliverables, timeline, etc.</th>
<th>No cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Project Manager (STP Secretariat Staff)</td>
<td>Manage and oversee execution of the Plan’s deliverables</td>
<td>No cost</td>
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<tr>
<td>3. Project Coordinator and Writer (Consultant)</td>
<td></td>
<td>$300,000</td>
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<tr>
<td>4. WHO TME</td>
<td>Advise and guidance</td>
<td>$200,000 - 600,000</td>
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<td>5. Innovation Section Contractor</td>
<td>Development of basic research, new tools and costed roadmap</td>
<td>$150,000</td>
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<td>6. Country &amp; Regional Modelling Section Contractor</td>
<td>Development of the country and regional costed projections and models</td>
<td>$560,000</td>
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## Activities & Budget

<table>
<thead>
<tr>
<th>Activity Description</th>
<th>Date</th>
<th>Cost</th>
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<tbody>
<tr>
<td>1. Steering Committee Meeting #1</td>
<td>Mar. ‘14</td>
<td>$30,000</td>
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<tr>
<td>2. Regional Consultations (8)</td>
<td>Oct.-Dec. ‘14</td>
<td>$320,000</td>
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<tr>
<td>3. Steering Committee Meeting #2</td>
<td>Dec. ‘14</td>
<td>$30,000</td>
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<td>5. Communities/CS Consultation</td>
<td>Jan. ‘15</td>
<td>$100,000</td>
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<td>6. Stakeholders Meeting</td>
<td>Feb. ‘15</td>
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<tr>
<td>7. Draft Plan #2 (incorporate feedback)</td>
<td>Mar. ‘15</td>
<td>No cost</td>
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<tr>
<td>9. Finalize Plan (incorporate feedback and design, layout &amp; print )</td>
<td>Jun.-Aug. ‘15</td>
<td>$20,000</td>
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<tr>
<td>10. Launch Final Plan</td>
<td>Sept. ‘15</td>
<td>$20,000</td>
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Overall Budget

Total Required
$1,850,000 USD

Currently Available
$350,000 USD
Modelling to support the New Global Plan to Stop TB (2016-2020) (proposal)

Richard White
London School of Hygiene and Tropical Medicine, and
TB Modelling and Analysis Consortium (TB MAC)
• Tenure at LSHTM
• Personal and research group funding support from (5yrs)
  – UK Medical Research Council
  – EU
  – BMGF
  – TB Alliance
  – Aeras
Overview

- Aims, scope and constraints
- Regions and ‘deep-dive’ countries
- Proposed modelling methods
- Example projection
- Timeline
- Key needs
Aims, scope and constraints

• Costed implementation plan 2016-2020
• Be feasible and technically sound
• Be consistent with WHO new Strategy (developed by GTB jointly with all partners)
  – same epi model used for GP as used to explore reaching the 2025/35 targets
• Be ‘current’
  – Regional and Global estimates PLUS country ‘deep dives’
  – Social protection/UHC
Regions and ‘deep-dive’ countries (very provisional)

• As Mario presented
• ~9 possible ‘Epi-geo-political’ regions and ‘deep dive’ countries (in brackets), eg
  – Asia/Oceania (?)
  – China
  – Europe (?)
  – Eurasia (?)
  – High income countries (?)
  – India
  – Latin America (Brazil)
Proposed modelling methods

- TIME (TB Model in Spectrum)
- New simple ‘consensus’ dynamic TB Model created from input from expert group of TB modellers
  - Houben, Pretorius, Dowdy, Cohen, White
- 4 components
  - Data review
  - Matches WHO TB/HIV current burden estimates
  - Project future health impact of TB/HIV interventions
  - Links to (now updated to WHO standard) OneHealth economic tool for costing and affordability
- Used by GF for Sudan & Bangladesh Allocative Efficiency country workshops & to inform NSPs & GF concept notes; +3-5 countries in 2014
Example projection for country/region X

• ~3 scenarios of costs (2016-2020) and epi impact (2016-2035)

  1. Current
     • Current trajectory in country/region/global

  2. Ambition
     • Projection for decline if country scale-up ambitions are realised

  3. Target
Timeline

- GTB scope and epi impact scenarios at global/regional/country level
- GP costing by STP
- Benefits from ‘semi-independent’ but aligned TB MAC multi-model country

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<th>2014</th>
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<th>2016</th>
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<tr>
<td>GTB global/regional modelling</td>
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<td>Global Plan costing</td>
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<td>TB MAC</td>
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Key needs

• Strong backing from STP board
• Strong coordination between STP and GTB
• Input of countries and research partners
• People
  – Futures modelling team (Carel Pretorius @50% + 3 @100% for 1 year)
• $s
  – US$ 560,000 (Futures)