

Executive Committee Teleconference, 7 July 2016  
Minutes

| Attended:   | Apologies:  | Secretariat   |
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| Joanne Carter (Vice-Chair) & Delia Clayton<br>Erika Arthun<br>Amy Bloom<br>Cheryl Boon<br>Austin Obiefuna<br>Aaron Oxley<br>Thokozile Phiri-Nkhoma<br>Victor Ramathesele<br>Mario Raviglione  | Paula Fujiwara<br>Gloria Wiseman<br>Cheri Vincent | Lucica Ditiu<br>Shirley Bennett<br>Andrew Codlin<br>Suvanand Sahu<br>Geoffrey Martello<br><br><b>Spark Street Consulting</b><br>Nina Schwalbe<br>Upjeet Chandan   |
| Minutes of Discussion   |   | Outcome   |
| <b>1. Stop TB Partnership Key Performance Indicators</b>  |   |   |
| <p>The draft Stop TB Partnership Key Performance Indicators were presented to Executive Committee. The draft KPIs were developed based on input from the Secretariat as well as through consultation with Executive Committee and Board members. If more than 70% of the feedback supported or aligned with the KPI, it was retained. If two or more pieces of feedback had a similar comment, the comment of interest was addressed. If less than 70% of the feedback aligned with how the KPI was drafted, a new indicator was suggested.</p> <p>Feedback consensus included:</p> <ul style="list-style-type: none"> <li>Indicators should be chosen to see results vis-a-vis the Stop TB Partnership’s contribution;</li> <li>There is a need to establish ambition (high, moderate, etc.) and evaluate how realistic proposed targets are;</li> <li>There should be a midterm review of KPIs and overall strategy.</li> </ul> <p>The Executive Committee welcomed the draft KPIs for Stop TB’s strategic goals, and discussed and reviewed each KP. The Executive Committee noted the need to keep the number of KPIs limited. The Executive Committee also asked that, where possible baseline and targets be developed for the KPIs.</p> <p><i>Goal 1: Advocacy, catalyse and facilitate sustain collaboration</i></p> <ul style="list-style-type: none"> <li>Sub-goal 1 – The Executive Committee discussed whether the KPI should be written with national or global picture. It was recognized that the Secretariat may be better positioned to work on a global scale,</li> </ul> |   | <ul style="list-style-type: none"> <li>The Secretariat to revise the draft Key Performance Indicators based on Executive Committee feedback and discussion.</li> <li>The Secretariat will finalize the Key Performance Indicators and work toward the development of baselines where they are needed.</li> <li>The Key Performance Indicators will be presented at the Coordinating Board pre-briefing as well as presented for approval at the Board meeting in September 2016.</li> </ul> |

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| <p>whereas partners might better serve on the national scale. The Executive Committee asked the Secretariat to consider if there was a way of measuring both national and global level in this indicator.</p> <ul style="list-style-type: none"> <li>• Sub-goal 2 – The Executive Committee agreed with the suggested KPI.</li> <li>• Sub-goal 3 – The Executive Committee felt the current KPI draft does capture the breadth and depth of the Partnership’s work with the Global Fund and suggested the KPI should be focused on implementing the Global Fund strategy.</li> </ul> <p><i>Goal 2: Support the development, replication and scale-up of innovative approaches to overcome systems barriers</i></p> <p>Overall the Executive Committee suggested that the KPIs for this goal should be focused on TB REACH for the strategy period. The Executive Committee requested the mathematics behind measure be checked.</p> <ul style="list-style-type: none"> <li>• Objective A – It was agreed that diversifying the donor base for TB REACH is a measure of advocacy and communication and does not directly measure how TB REACH is doing. The Executive Committee asked for a new KPI to be drafted for this Objective.</li> <li>• Objective C – The Executive Committee felt that 75% of scale up may be too high of a target and asked the Secretariat to re-examine the target.</li> </ul> <p><i>Goal 3: Facilitate worldwide, equitable access to TB medicines and diagnostics included new tools, across sectors</i></p> <p>The feedback from the interviews indicted strong consensus on the draft KPIs for Goal 3.</p> <ul style="list-style-type: none"> <li>• Objective D – The Executive Committee agreed the KPI should cover more than just paediatric formulations and also asked the target be re-examined as 75% of scale up may be too high.</li> </ul> <p><i>Goal 4: Ensure the optimal and efficient functioning of the Secretariat.</i></p> <p>The Executive Committee agreed that the KPI for Goal 4.1 should include core Secretariat staff costs as well as overhead office costs, PSC and UNOPS CMDC and LMDC costs.</p> |  |
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**2. Stop TB Partnership 28<sup>th</sup> Coordinating Board Meeting, 19-20 September, New York**

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| <p>The Secretariat briefed the Executive Committee on planning for the 28<sup>th</sup> Coordinating Board meeting in September, including invited and confirmed guests and plans for two high-level events.</p> <p>Two high-level events are being planned: the first is a pre-board discussion on the morning of 19 September for two hours. It will be a facilitated session between members of TB affected communities, high-level representatives of the board and key individuals in multilateral institutions. The focus will be on joint-United efforts toward ending TB with a special</p> | <ul style="list-style-type: none"> <li>• Three candidates for WHO Director-General to be invited to the Coordinating Board meeting.</li> <li>• Secretariat to move ahead with planning high level dinner on 19 September 2016.</li> </ul> |
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angle on domestic financing from the perspectives of the various participants present. It has been proposed to use this time to have the three candidates for WHO Director-General describe their future role in supporting the fight to end TB. The Executive Committee welcomed the suggestion of engaging the three candidates for WHO Director-General in the opening session of the Coordinating Board meeting.

The second event being planned is a high-level dinner hosted by acclaimed Ethiopian-born chef Marcus Samuelsson, who had tuberculosis as a child. It is suggested to hold the high level dinner on the evening 19 September 2016.

The Executive Committee welcomes the update on planning for the Stop TB Partnership 28<sup>th</sup> Coordinating Board meeting.