

{loadposition annualreport2013} Programmes and priority-setting

WHO increased its commitment to the global and regional health strategic priorities and engaged the organization at regional and country levels in a comprehensive effort to improve the management, to strengthen the technical expertise and to focus on priority areas.

The 2012–2013 biennium closure at the end of the year indicated a 52% increase in the allocated programme budget for the Region compared to that initially approved, the increase being largely in the outbreak and crisis response and the Special Partnership Agreements segments. By the end of the biennium, the allocated programme budget was 88% financed, with an implementation rate of 91% against received funds.

Following the approval of the 12th General Programme of Work 2014–2019 (GPW12) and programme budget 2014–2015 in May 2013, a coordinated operational planning process was implemented to ensure all three levels of the organization were aligned to deliver on the commitments made to Member States. The Regional Committee adopted a resolution advocating for an operational planning process which promotes a bottom-up approach and prioritization that focuses on key priorities. The objective is to achieve the highest level of alignment with country priorities. The Region then successfully piloted the first bottom-up approach to operational planning of the programme budget 2014–2015 in all countries keeping these two objectives in mind: planning according to the country needs and special focus on key areas of work (for which at least 80% of the total budget space is allocated). The intention was to increase the impact of WHO's support to countries and avoid the fragmentation of the past biennia. The successful experience of our region in planning for the 2014–2015 was followed by the rest of the Organization in planning for the following biennium (2016–2017).

Governance

The Regional Office continued its programme of management reform. High-level meetings for representatives of Member States and permanent missions in Geneva prior to each major meeting of WHO's governing bodies (World Health Assembly, Executive Board) and concise and timely briefings continued to be provided in order to strengthen the contribution of Member States of the Region in global discussions on health and the work of the governing bodies. In line with the revised rules of procedure of the Regional Committee, a meeting took place one day before the Session to discuss pertinent technical issues. This practice, which has been appreciated by Member States, will continue in 2014.

Management

Efforts to strengthen WHO country presence continued, with emphasis on improving technical expertise and overall management in line with WHO reform. Country office capacities were assessed in relation to the six categories of work to ensure the presence of strategic and technical leadership capabilities. 2013 witnessed significant expansion in technical capacity in several country offices.

The overall security challenges continued to pose significant challenges for the safety and security of personnel and implementing partners. Nevertheless, work environments were enhanced in a number of country offices to make them more healthy, productive and safe. The overall level of compliance of WHO offices throughout the Region with the minimum operating security standards (MOSS) of the United Nations had increased from 41% in 2012 to 74% by the end of 2013.

A number of initiatives to upgrade premises were undertaken, including construction of a sub-office in Garowe, Somalia, relocation of the country office in Djibouti to new premises, and completion of the country office, Tunisia, to accommodate the staff and the Global Training Centre.

Substantial support to all countries in the Region included procurement of supplies and services worth US\$ 307 million. Special attention was given to countries facing emergencies for the procurement of medicines, equipment and services worth US\$ 216 million. To ensure rapid response to emergency needs, a regional stock was established in the United Nations Humanitarian Response Depot (UNHRD) in Dubai.

An internal communication strategy was launched to increase compliance in a number of areas including performance management and adherence to staff rules and regulations. Improving compliance will remain a top priority over the coming three years. A newly appointed senior compliance officer will lead the work in 2014 under the direct supervision of the Regional Director. Development of a policy framework for the rotation and mobility of staff was initiated in order to address the deteriorating effect of staff remaining in one duty station for too long.

The risk management framework introduced earlier in the biennium is in operation across the Region and a risk register was approved by the Regional Director, resulting in active management of strategic and operational risks and mitigation measures. A regional business continuity plan was developed and operationalized.

The complexity of the operational and security issues continued to create challenges and constraints not faced in other regions. Nevertheless, good progress was made in implementing audit recommendations, resulting in improvement in overall financial records. A temporary finance officer was recruited and based in the Somalia country office to oversee the financial controls in several countries in the Region. Although the number of outstanding technical and financial reports relating to direct financial cooperation (DFC) decreased, stricter control and follow-up is required. This is a concern which is constantly being highlighted in audit reports and is also high on the agenda of the various governing bodies. WHO continues to urge Member States to play an active role in ensuring the provision of quality reports in a timely manner.

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