

**Report of the thirty-second Meeting
of the Independent Expert Oversight Advisory Committee (IEOAC)
of the World Health Organization**

Virtual meeting | 03 November to 6 November 2020

AGENDA ITEM 1

Opening and administrative matters

- The Chair confirmed a quorum with three of the members of the IEOAC present.
- Mr Bert Keuppens, who will join the next meeting of the Committee as a member in March 2021, was invited by the Chair to attend the various presentations made by the Secretariat to the Committee and observe its proceedings.
- No conflicts of interest were recorded by the present members.
- The agenda was unanimously adopted.
- In view of the ongoing COVID-19 situation the meeting was held virtually with the secretariat present at the WHO-offices in Geneva.
- Agenda and Participant list of the meeting is enclosed.

AGENDA ITEM 2

WHO Overview Briefing | CdC, ADG/BOS

Context | Summary

- Because of the re-occurrence of COVID-19 WHO currently operates with circa 350 staff being physically present in the head office in Geneva and other staff working remotely. In line with the increased case-count in Geneva the WHO head office is also affected by higher infection rates among staff.
- The long period of remote work has been mastered well from a technical standpoint of view, however, WHO is – like most organizations working remotely over an extended period of time - experiencing visible signs of negatively affected staff wellbeing, engagement and overall mental health. The personal situation of staff and the limited abilities for connections among staff and teams increases health risks.
- Senior Management reported on the overall communications strategy of WHO in an environment characterized by “fake news” and “alternative facts”. WHO attempts to handle all communication challenges in an unemotional way and strictly adhering to the “based on science” rule.

Recommendation I

- Senior Management is invited to consider alternative and/or augmented-- ways of addressing the remote-staff engagement, working fatigue and mental health challenges of staff

AGENDA ITEM 3

Terms of Reference (“ToR”) of the IEOAC | CdC, ADG/BOS

Context | Summary

- **Following the JIU-Review ¹ the need to amend the ToR was discussed on various occasions.**
- The IEOAC had presented a draft of new ToRs to Management as a discussion basis. The IEOAC suggests a stronger and clearer delineation of duties with the Independent Advisory Oversight Committee (IOAC) for the avoidance of duplicative and overlapping oversight work. Furthermore, the IEOAC is of the view that various organizational changes made at the WHO in the larger context of Transformation should be adequately reflected in its new ToRs.

Observations

- **Senior Management agreed to provide written feedback and engage all relevant parties in between formal IEOAC-meetings.**
- **Senior Management agreed to the broad timeline of finalizing the modernization process of TOR by mid-2021.**

Recommendation II

- **Senior Management to provide written feedback to the IEOAC on proposed new ToR as well as an implementation roadmap by 15 DEC 2020**

AGENDA ITEM 4

European Regional Office (EURO) and the Country Office of Turkey from a WHO Headquarters Perspective | CdC; ADG/BOS); Director IOS; Coordinator, CRE; Unit Head Treasury; DG Representative for Evaluation and Organisational Learning (EVL), Senior Adviser, Organisational Learning (EVL).

Context | Summary

- **The Meeting served as a preparation of the virtual visit to the EURO-region and to obtain WHO Head Office views on progress and challenges in EURO.**
- **Key aspect noted were**
 - **The special character of the EURO-region with 53 member states and a large number of dispersed offices**
 - **The set-up with GDOs (Geographically Dispersed Offices²) with external funding**
 - **A comparatively centralized management approach in EURO which supports positive outcomes in areas such as finance but led to challenges in emergency situations like the Syria-conflict**
 - **Despite the humanitarian character of payment flows and the availability of an OFAC (Office of Foreign Assets Control)-license the EURO-region is facing challenges in bank transfers into Syria. Despite the officially licensed exception to applicable sanctions**

¹ JIU/REP/2019/6 “REVIEW OF AUDIT AND OVERSIGHT COMMITTEES IN THE UNITED NATIONS SYSTEM”

² WHO European Office for the Prevention and Control of Noncommunicable Diseases (Moscow); WHO European Centre for Environment and Health (Bonn); WHO European Centre for Preparedness for Humanitarian and Health Emergencies (Istanbul); WHO European Centre for Primary Health Care (Almaty); WHO Barcelona Office for Health Systems Strengthening (Barcelona); WHO European Office for Investment on Health and Development (Venice).

regime, less and less banks are willing to handle these transfers, thereby limiting the effectiveness of WHO interventions.

Observations

- The Committee would like to thank the contributing units for their preparation which greatly facilitated enhanced effectiveness of our visit to EURO.

AGENDA ITEM 5

Performance Management at WHO-Systems and Practice | ADG/BOS, Director (HRT) a.i.

Context | Summary

- The committee agenda includes oversight over the translation of Sustainable Development Goals (SDGs) and overall WHO goals (“the triple billion”) into outcomes and goals for individuals and teams across WHO.
- This meeting served to understand the connection between organizational goals and the system of goal setting at the employee level. WHO operates a comprehensive suite of performance management systems, processes and tools, however the tool is over 10 years old and needs to be replaced as part of the upgrade of the ERP-system. The overall design of performance management, however, does not provide incentives to individual leaders across the organization to provide the necessary feedback as evidenced by the distribution of ratings, where 95% of the staff are getting very favorable ratings (Annex 1)

Observations

- The committee recognizes the difficulty of establishing a coherent system of outcomes, output and goals across the three levels of the organization and the challenges of appropriate attribution.
- The committee noted the absence of a formal performance calibration mechanism to ensure equal application of ratings across the organization.

Recommendation III

- Senior Management to consider including both individual and team goals in individual performance contracts

Recommendation IV

- Senior Management to consider introduction of a formal performance management calibration mechanism including review of the current 5 scale ratings system to a more practical scale based on current practices.

Recommendation V

- Senior Management to consider publishing the distribution of staff ratings on aggregated level within WHO to provide a benchmark and transparency to individual staff members.

AGENDA ITEM 6, 7 and 8 were combined into one session.

(6)EURO Overview: Introduction, strategic priorities and achieving effectiveness, (7)EURO: Strategic Focus; (8)EURO: Focus on Finance and Accountability Functions | RD; ADG/BOS; Director,

BOS; EXD; Special Advisor, Transf. & Org.; SRC; Unit Head, PRM **Director, EU/CSE, BFO, HRM, Unit Head PRM ;** Desk Officer.

Context | Summary

- Introduction to the EURO-region comprised of 53 member countries across a wide spectrum of GDP- and health-service indicators.
- The region translated the GPW 13 into a region-specific EPW (Euro Program of Work) with particular emphasis on:
 - The Power of positive partnerships
 - Country focus
 - A WHO fit for purpose
- Strategic initiatives are translated into actionable pieces of work on EURO’s way “from good to great”. Initiatives include systematic searches for root-causes of challenges, focus on the “how” as much as the “what”, use of the WHO convening power, the recognition of regional differences and creation of sub-regional initiatives (i.e. for Eastern Europe), systematic focus on efficiency, transfer of headcount to country offices, digitization of processes and work and the hiring of a regional Ombudsperson.
- The EURO region is guided by the principle of focus on normative and technical work to address the “wicked health issues” of the region and the ambition to become the first port of call for regional Health Ministries.
- The EURO region recognizes the need to substantially enhance the data and analytics capabilities of WHO to be able to move from data to information and finally to insights. Improving health information systems is part of the change agenda of the region with systemic gap analyses being performed and the move from static (mostly outdated) data to modelling and predictive capabilities.
- The region understands that transformation and efficiency improvements entails disruptions. and as such is guided by the principle of creating “employability” for staff (skills development, training) rather than “guaranteed employment”.

Observations

- The committee commends EURO-region for its ambitious change agenda in a diverse environment and recognizes the consistent challenge of resource mobilization for middle-income countries that may fall outside of preferences of providers of voluntary contributions
- The committee believes that adding an efficiency perspective to the usual WHO effectiveness focus is suitable and initiatives harnessing the power of digital such as the move of the Copenhagen data center to the cloud, the structured review of country presence and moving selected headcount to country level should be continued
- The discussion on context, need and effectiveness of dispersed technical units (GDOs) focused on these units being part of the vision of the EURO-region while admitting that the overall organizations understanding for these special units may be enhanced. The committee applauds the EURO-region for its suggestion to include GDOs into its proposal for audit engagements in 2021.
- The EURO-focus on innovation is evidenced by the WHO European Regional Director’s Oslo Initiative that aims to create a new vision for collaboration between the public and private sectors that will enable access to high cost-effective novel medicines. This Initiative will consider the existing roles and responsibilities of the various stakeholders to bring a medicine

to patients and identify where there is a mismatch in expectations and practical issues. These differences in expectations and practical issues will be discussed and solutions identified. To get to a better agreement, this negotiation will require discussions with the public and private sectors which is being done in strict accordance with FENSA. Working in collaboration with the WHO EURO partnerships and legal teams. The experience of EURO, however, is that to date whilst FENSA sets out a clear framework, it is not sufficiently detailed to enable the risks involved on specific interactions to be identified and managed appropriately. This lack of differentiation and absence of accompanying standard operating procedures, tools and instruments, leads to a 'one size' fits all approach which by necessity has to be very restrictive to avoid the potential perception of capture. Examples where more nuance is needed include whether the declared interest is direct or indirect, financial or non-financial, commercial or academic. This also applies to experts and other categories of Non State Actors. In addition, for pharmaceuticals, these are products that are needed and the interactions therefore have to be differentiated from alcohol, highly processed food and tobacco.

Recommendation VI

- IOS to consider adding EURO GDOs to the audit program of 2021

Recommendation VII

- European Regional Office to carry out a cost benefit analysis of GDOs with a focus on the need for enhanced collaboration amongst them.

Recommendation VIII

- Senior Management to continue building out FENSA as the primary tool of interaction with non-state actors and a particular emphasis on its enabling rather than the prohibiting elements. Part of this can entail identifying specific good practices and case studies to aid in considering individual situations.

Recommendation IX

- EURO-region to continue focus on efficiency in addition to effectiveness focus and further enhancements of digital process support and overall digital infrastructure as well as further aligning outputs to outcomes

AGENDA ITEM 9

Country Office of Turkey Overview | ADG/BOS; RED; Director, BOS; WR a.i.; WHE Lead; NPO; AO Context | Summary

- Introduction to the WHO office in Turkey comprising of 66 staff and a strategy of focus on normative work supporting the strong public health infrastructure of the Republic of Turkey (upper middle income country)
- The country office Turkey operates within the geographic territory of the Republic of Turkey and provides emergency response to appr. 4.5 million people in northwest Syria out of its Gaziantep office and as part of the “whole of Syria approach” of the UN-system.

- The cross-border operations into northwest Syria are based on a UN Security Council mandate ³currently limited until July 2021. The country office has made appropriate contingency plans should the UN Security Council mandate not be renewed.
- The country office actively works with implementing partners in northwest Syria and uses the services of Third-Party Monitors to provide reasonable assurance over activities.
- While WHO has not joined the HACT (Harmonized Approach for Cash Transfers) initiative of other UN-agencies, the principles of this approach are adopted at the country office as well.
- All NGO-partners are properly onboarded in accordance with relevant FENSA-processes and the country office operates on a renewed delegation of authority from Regional Office

Observations

- Providing assurance for operations in northwest Syria while not being able to travel to the territory for security reasons provides challenges. The use of trusted Third-parties for monitoring and regular auditing is required to ensure the highest possible level of assurance.
- The inter-agency competition between UN-agencies might put WHO at a disadvantage if funding commitments are shorter than those of friendly competitors.

Recommendation X

- Country Office to ensure that regular auditing of accredited implementing partners is carried out in a timely fashion

Recommendation XI

- Country Office to consider shifting temporary employment contracts to longer terms with the addition of a provision “subject to renewal or availability of funds and/or extension of mandate” in line with other UN-agencies practice

AGENDA ITEM 10

Country Office of Turkey: Effectiveness of WHO Transformation Agenda | ADG/BOS; Director, BOS; WR a.i.; RED; NPO; AO

Context | Summary

The Country Office of Turkey presented the work of Transformation and challenges faced.

Recommendation XII

- At the country level WHO should continue to employ its efforts on Transformation and above all ensure ownership of the overall process and objectives

AGENDA ITEM 11

Feedback and meeting with Ministry of Health (“MoH”) | DG MOH, MOH; ADG/BOS; WR a.i.; WHE Lead; NPO; AO; Desk Officer SRC

Context | Summary

- After the exchange of pleasantries the committee thanked the representative of the Ministry of Health of the Republic of Turkey for their commitment to WHO, their support for the EURO-region and the EPW, the country office and the support of regional authorities for the office in Gaziantep

³ S/RES/2165 (2014) and S/RES/2533 (2020)

- The MoH noted the strengthening of WHO through transformation and the ever-increased role of country offices.
- The MoH reiterated the need to use experiences from dealing with the COVID-19 outbreak as a basis for overall pandemic response planning
- The MoH fully subscribes to multilateralism and the role of a strong WHO as the normative authority in health work.
- The only item for improvement is a requested shifting of responses to an even more agile way of working and – especially during COVID-19 times – prioritizing speed over perfection. Health Ministries are under pressure to reply to political requests within extremely short time frames and WHO should be able to move equally fast

Recommendation XIII

- **Senior Management to continue to ensure that procedures and processes related to pandemic-response establish the right balance between perfection and speed**

AGENDA ITEM 12

Feedback Session with EURO, Senior Management and Country Office of Turkey| DDG; RD; CdC; ADG/BOS; Director BOS; WHE Lead; WR

Context | Summary

Following the detailed discussions the IEOAC held with the Europe Regional Office , Country office of Turkey and the Turkish Ministry of Health, the committee provided the following observations to Senior Management and the Country office of Turkey with the objective of streamlining and strengthening WHO’s work across it’s the three levels of the organization:

- **The auditing of implementing partners of the WHO should be expedited in order to reduce complacency and increase transparency**
- **With respect to funding issues, due to the challenging Covid-19 health situation, WHO headquarters should ensure its continued support to the EURO and its country offices.**
- **EURO should consider anticipating the renewal of short-term staff contracts as multiple short-term contracts for the same staff are not only administratively heavy but do not facilitate work continuity. Caveats to enable extension of contracts such as the inclusion of terms like “employment based on the availability of funding” should be considered.**
- **Focus should be placed across the organization on data development and its relative challenges to ensure informed decisions are made.**
- **Risk Management should be embedded and focused on the enterprise level to ensure it is not divorced of reality**
- **WHO should not hesitate to capitalize on information from other national audit offices who may have studies on lessons learnt from the Covid-19 health crisis that can be of use to the Organization.**

_WHO should ensure its evaluation effort are robust. To ensure effectiveness and engagement, WHO staff as well as its non-staff and partners should have a clear understanding of their tasks. Evaluation efforts should consider meaningful outputs and outcomes.

AGENDA ITEM

Special Session with WHO Director-General

- The committee used the opportunity of this meeting to thank Dr Tedros and all WHO staff for their work in 2020 under especially challenging circumstances
- Key items raised by the committee included the establishment of a system or mechanism for regular tracking of implementation/remediation of findings from assurance bodies such as External Audit, IOS, Evaluations, JIU and potentially others and suggested including this item as part of performance evaluation of senior management as part of their compact with the DG. Furthermore, continued focus on risk management across the first line; continued investments in assurance functions; investments in stronger data & analytics capabilities; the link between Sustainable Development Goals, Triple billion goals and individual performance management; and early operational lessons learned from the COVID-19 experience were addressed
- The committee acknowledged the increasing openness of WHO to establish private sector partnerships and the actions taken to ensure an ongoing transformation through initiatives such the ACT-Accelerator convening of work on fair distribution of COVID-vaccines worldwide and the WHO-Academy.

ACKNOWLEDGEMENTS

The IEOAC team would like to give recognition to the courage and dedication of the individuals working for the WHO in a complex operational environment covering a large number of countries at different stages of development. We wish to express our sincere appreciation to the WHO Secretariat, the Europe Regional Office (EURO), and the Turkey Country Office for facilitating virtual visits to Copenhagen and Ankara.

**Mr Christof Gabriel Maetze (Chair), Mr Jayantilal Karia,
Mr Christopher Mihm.**

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Annex 1: WHO

Major Office	Year	Objectives			Competencies			Overall Rating						
		FA	PA	NA	FD	PD	ND	O	FS	S	PU	U	NR	O+FS+S
AFRO	2017	84.0%	15.0%	1.0%	90.1%	9.6%	0.3%	5.0%	60.2%	31.0%	1.3%	0.1%	2.4%	96.2%
	2018	83.0%	16.0%	1.0%	92.0%	7.8%	0.2%	4.4%	56.7%	35.1%	1.4%	0.2%	2.2%	96.2%
	2019	84.0%	15.0%	1.0%	92.0%	7.0%	1.0%	3.5%	59.7%	32.3%	1.9%	0.3%	2.3%	95.5%
EMRO	2017	90.0%	7.7%	0.6%	94.7%	5.0%	0.3%	9.1%	68.6%	18.1%	0.6%	0.2%	3.3%	95.8%
	2018	91.0%	8.0%	1.0%	94.5%	5.3%	0.2%	11.0%	69.0%	17.2%	0.6%	0.2%	2.0%	97.2%
	2019	92.0%	7.0%	1.0%	94.7%	5.2%	0.1%	11.0%	69.0%	17.3%	0.6%	0.2%	1.9%	97.3%
EURO	2017	94.0%	5.0%	1.0%	97.1%	2.8%	0.1%	30.0%	60.0%	8.5%	0.0%	0.2%	1.3%	98.5%
	2018	95.6%	4.0%	0.4%	97.7%	2.1%	0.2%	31.0%	61.5%	5.7%	0.3%	0.2%	1.3%	98.2%
	2019	95.4%	4.2%	0.4%	98.0%	1.8%	0.2%	34.0%	57.5%	6.6%	0.3%	0.2%	1.4%	98.1%
HQ	2017	92.4%	7.0%	0.6%	97.5%	2.3%	0.2%	20.1%	69.2%	8.9%	0.4%	0.3%	1.1%	98.2%
	2018	93.0%	6.3%	0.7%	97.9%	1.9%	0.2%	22.5%	67.4%	8.3%	0.4%	0.0%	1.4%	98.2%
	2019	94.0%	5.5%	0.5%	98.3%	1.6%	0.1%	25.3%	65.8%	7.8%	0.4%	0.0%	0.7%	98.9%
SEARO	2017	94.1%	5.0%	0.7%	95.6%	4.2%	0.2%	18.5%	68.0%	11.7%	0.8%	0.0%	1.0%	98.2%
	2018	92.1%	6.2%	1.7%	95.7%	4.2%	0.1%	19.0%	69.5%	9.1%	0.8%	0.0%	1.6%	97.6%
	2019	93.0%	6.0%	1.0%	96.3%	3.6%	0.1%	16.9%	71.6%	9.0%	0.3%	0.1%	2.1%	97.5%
WPRO	2017	92.8%	6.3%	0.9%	96.4%	3.5%	0.1%	14.1%	62.9%	17.6%	1.0%	0.0%	4.4%	94.6%
	2018	93.0%	6.0%	1.0%	97.4%	2.5%	0.1%	14.6%	66.1%	13.0%	0.3%	0.0%	6.0%	93.7%
	2019	92.4%	6.7%	0.9%	96.6%	3.4%	0.0%	10.8%	70.0%	14.3%	0.4%	0.0%	4.5%	95.1%
GLOBAL	2017	91.2%	7.7%	0.8%	95.2%	4.6%	0.2%	16.1%	64.8%	16.0%	0.7%	0.1%	2.3%	96.9%
	2018	91.3%	7.7%	1.0%	95.8%	4.0%	0.2%	17.1%	65.0%	14.7%	0.6%	0.1%	2.4%	96.9%
	2019	91.8%	7.4%	0.8%	96.0%	3.8%	0.3%	16.9%	65.6%	14.6%	0.6%	0.1%	2.2%	97.1%

Legend: FA: Fully Achieved, PA: Partially Achieved, NA: Not Achieved, FD: Fully Demonstrated, PD: Partially Demonstrated, O: Outstanding, FS: Fully Satisfactory, S: Satisfactory
 PU: Partially Unsatisfactory, U: Unsatisfactory, NR: No Rating

