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ACTIONS TAKEN IN 2004-2005 TO STRENGTHEN THE PAN AMERICAN SANITARY BUREAU, IN ACCORDANCE WITH THE STRATEGIC PLAN 2003-2007¹

This report supplements the information provided in Document CD46/15, entitled "Update on the Process of Institutional Strengthening within the Pan American Sanitary Bureau." In matrix format, this supplementary report presents specific examples of actions being undertaken by managers and staff across the institution to create efficiencies and improve the effectiveness of the Bureau2.

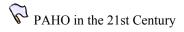
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¹ The title of this document aligns with the Executive Committee Resolution CE136.R3, entitled "Process of Institutional Strengthening of the Pan American Sanitary Bureau."

² Graphic symbols have been used to identify the activities where recommendations of the Working Group on PAHO in the 21st Century are already incorporated or will be addressed in the future, and where the recommendations of the External Auditor have been incorporated.

INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 1. RESPOND BETTER TO COUNTRY NEEDS.	
OBJECTIVES	ACTIONS	STATUS
Improve country-focused technical cooperation.	Review roles, relationships, and work processes across the Organization to ensure that work at the various levels adds value to country-level cooperation.	Proposal for mainstreaming Country Cooperation Strategies (CCS) in the managerial process prepared.
Effectively support the Country Offices.	Systematically use CCS as a tool for programming, involving all levels of the Organization.	PAHO has adapted WHO guidelines for CCS for the regional context. The concept of national health development is central to PAHO's technical cooperation approach and cooperation strategies (Document CE136/18).
	Enhance Technical Cooperation among Countries (TCC) as a mechanism for capacity building within the countries and as an opportunity to establish partnerships with institutions outside ministries of health. Such networks are required for achieving the Millennium Development Goals (MDGs).	A review of the experience of TCC in the last three biennia is reported separately (Document CE136/11).
	The commitment to the MDGs is contributing to the reorientation of the technical cooperation process, helping countries to develop multidisciplinary approaches to achieve the MDGs and other national goals.	An MDG focus incorporated in the BPB; PAHO is an active member of U.N. Country Teams and PAHO's activities are an integral aspect of interagency support to the countries. The MDG costing exercise is to be advanced in the Dominican Republic. Joint collaboration for ECLAC Regional Report on MDGs.
	Improve harmonization of processes and synergy with WHO to achieve common objectives.	Stronger alignment with WHO; Regional Office more involved in policy dialogues and organization-wide initiatives. PAHO in a better position to benefit more equitably from global resources available through WHO.
	Increase rotation, decentralization, and interagency movement of staff.	Concentrated effort to transfer functions, posts, and staff to the field under way. Rotations among staff from Regional Office and Country Offices, and movement from other WHO Regions and agencies have increased staff mobility.

² Graphic symbols:





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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 2. ADOPT NEW MODALITIES OF TECHNICAL COOPERATION	
OBJECTIVES	ACTIONS	STATUS
Develop/strengthen new modalities of work.	Develop and/or strengthen new modalities of cross-functional work through flexible Working Groups and Task Forces.	Working Groups and TAGs on HIV/AIDS, Essential Medicines, Renewal of Primary Health Care and Family and Community Health are functioning. Task Force for the 25th Celebration of the Alma-Ata Declaration established and functioning among others.
	Enhance interprogrammatic collaboration in the Regional Office and increase use made of joint missions to countries for greater effectiveness.	Interprogrammatic joint missions carried out to Guyana, Haiti, Nicaragua, and Peru.
	Focus on responding to needs of Key Countries now incorporated in PAHO's planning processes.	Task Force on Key Countries functioning. Guyana Day organized within World Health Assembly (May.2005). Stronger participation in international community activities on implementation of the Intermediate Plan of Cooperation for Haiti.
Strengthen coordination and develop strategic alliances.	Maintain regular contact with the U.N. Development Group (UNDG) secretariat to ensure PAHO's presence in UNDG meetings and strengthen the contribution to the UNDG regional work plan.	Coordination strengthened with the U.N. system through stronger presence in the Regional Director's forum of the U.N. Development Group. With the Inter-American system, strong participation in the Summits of the Americas and the Summit Implementation and Review Group (SIRG) meetings. PAHO supported and participated in the UNAIDS meetings of Regional Directors of cosponsoring agencies. PAHO participation in the Ibero-American Summit and the Ibero-American ministries of health meetings. PAHO participated in the Meeting of Ministers of Health and Environment (HEMA initiative). Together with ECLAC and other U.N. agencies, PAHO launched the Millennium Development Goals. A Latin American and Caribbean Perspective report. A follow-up presentation by PAHO and ECLAC to Washington-based international, federal, and civil society organizations held at PAHO HQs with the participation of the OAS Secretary General and representatives of the World Bank and the Inter-American Development Bank. PAHO playing leadership role in Interagency Strategy on Maternal Mortality Reduction with UNICEF and UNFPA and in the inter-American coalition on violence.

INSTITUTIONAL FRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 2. ADOPT NEW MODALITIES OF TECHNICAL COOPERATION	
OBJECTIVES	ACTIONS	STATUS
Strengthen coordination and develop strategic alliances (cont.).	Dialogue on new programmatic approaches with the main bilateral partners, such as USAID, CIDA (Canada), SIDA (Sweden), NORAD (Norway), and AECI (Spain).	New umbrella agreements negotiated with those agencies.
Support subregional integration.	Reformulate the technical collaboration programs with subregional health institutions according to their stated priorities. Some common areas are essential drug policies, border health, and social protection in health, among others.	The recently approved Regional Budget Policy with a subregional allocation is enabling PAHO to strengthen agreements with the Central American Secretariat for Social Integration, CARICOM, Convenio Hipolito Unanue, and the Andean Community of Nations, MERCOSUR Health Group, and Organization of the Amazonic Cooperation Treaty (OTCA).
	STRATEGIC OBJECTIVE 3. BE A REGIONAL FORUM FOR HEALTH IN THE AMERICAS	
Support capacity building for health at the local, national, and subregional levels.	Support leadership role of ministries of health, network of mayors, and municipal secretaries of health. Act as secretariat and provide training for integration of various institutions and actors in the development of the national health agenda. Strengthen CCM, U.N. theme groups, national commissions for MDGs, and other joint mechanisms.	Regional Tobacco Information System online; One Mortality Database module in evaluation; U.S./Mexico Binational Health Commission - successful separation of FEP and U.S./Mexico Border Health Association. The Health and Development Commission of the Caribbean, with support of PAHO/WHO, completed and presented its report to Heads of State of CARICOM. The Commissions of Macroeconomics and Investment in Health of MERCOSUR and the Andean Community have been organized and are in operation.
Position the Organization in the mainstream of global, regional, and country health policy debates	Strengthen capacity to support countries of the Region in anticipating and responding to global health issues and in influencing the global health agenda.	Regional consultations organized for the 11th GPW; implementation of the Tobacco Framework Convention; revision of the International Health Regulations. Harmonization and collaboration on development aid; public health concerns on trade agreements; joint negotiations; and pool procurement of ARVs.





INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 3. BE A REGIONAL FORUM FOR HEALTH IN THE AMERICAS. (cont.)	
OBJECTIVES	ACTIONS	STATUS
Position the Organization in the mainstream of global, regional, and country health policy debates (cont.).		Hosting WHO interregional meetings and global policy dialogue: Patient Safety Initiative, Global Summit on Health Research, Commission on Social Determinants, RIMSA 14, Regional Report on MDGs, Workshop on SWAPs.
	STRATEGIC OBJECTIVE 4. CREATE A KNOWLEDGE-BASED/LEARNING	G ORGANIZATION.
Network and share knowledge within the Organization and between the Organization and its constituencies.	Take actions to eliminate compartmentalization, strengthen cross-functional cooperation, improve teamwork, share information and knowledge. Develop policies for organization-wide IT governance. Create new Area for Information and Knowledge Management.	IKM's structure and plan of action approved. The new Information and Knowledge Operations Unit (IKO) established. Training course in Knowledge Management delivered. IKM Listserver and SharePoint sites established to keep staff and partners informed. IKM strategy approved in December 2004.
	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES	S.
Align with WHO framework for result-based management to improve planning, implementation, and monitoring of PAHO's overall strategy.	Provide better linkage between the Bureau's Expected Results and WHO's Global Expected Results. Base budgeting structure on Areas of Work (AOW) instead of Classified List of Programs. Develop the Biennial Program Budget (BPB) 2006-2007 within the framework of the PAHO Regional Budget Policy, approved by the 45th Directing Council. Ensure new modalities in BPB planning and formulation to improve coordination with WHO, the	Completed. Completed. New guidelines for BPB 2006-2007 reflect this framework, and planning and budgeting process revised accordingly. Peer reviews of BPBs for Country Offices, Regional Office, and Centers completed to ensure alignment with policies and
	Regional Office, Country Offices, and Centers; improve transparency and enhance quality and relevance of outcomes.	strategic objectives.





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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES. (cont.)	
OBJECTIVES	ACTIONS	STATUS
Improve budget and expenditure reporting.	Provide frequent financial reporting to Executive Management on Regular Budget funds, extrabudgetary funds, and all proprietary funds. Inform Executive Committee Members if cumulative month-end deficit exceeds \$10 million, and seek approval from Executive Committee for internal borrowing as appropriate. Provide timely information regarding the status of quota assessments and payments.	Financial reporting provided monthly via Sharepoint to Executive Management. The Organization's financial performance monitored regularly. Status report on contributions reflecting Member States' quota assessments and payments now posted on the PAHO internet site. Payment in local currency authorized.
Maximize extra- budgetary resources while ensuring attention to priorities.	Establish the Project Support Unit (PPS/PS) to review and certify projects for submission to interested external partners. The PPS/PS review process ensures policy alignment; technical strategy, project design, managerial soundness, and financial sustainability.	PPS/PS Unit established in 2004. New directive on review process for proposals has been implemented and staff being trained to improve quality of project development and review. A record \$135.1 million was recognized in extrabudgetary income, including \$25.6 million from WHO, for the 2004-2005 biennium through June 2005.
Improve access to information through greater connectivity among PAHO offices.	Implement a global management system for planning and management of financial resources. The Bureau has new capacity to handle the daily upload of data through AMPES/OMIS–FAMIS. The system has improved the timeliness of available financial information for decision-making and increased the number of obligations initiated in AMPES/OMIS with links to the program of work.	Changes being made to AMPES to provide reports that better serve program and financial management needs. Information Technology Services (ITS) increased in Guyana, Haiti, and Suriname.
Improve accountability and transparency.	Review and update managerial principles and policies, procedures, guidelines, and administrative process in Country Offices, Centers, and Regional Office to adapt them to the changing needs of the Organization, including delegation of authority to Areas and Units with clear accountability. Upgrade and enhance management systems to conform to rigorous standards. Eliminate inconsistencies in data from one system to another and duplicate data in multiple systems.	Standards for Accountability and Transparency Team in place to conduct governance Improvements. Delegation of authority revised and issued in accordance with realignment and new institutional structure. Internal Audit Office fully staffed and connected to WHO. Performance and programmatic audit by IOS undertaken on Procurement and EPI Revolving Fund and HIV/AIDS Unit. Ongoing JIU assessment of RBM practices and implementation in PASB. In-progress improvements made in Finance and Procurement (FAMIS/ADPICS), Financial Management, Personnel (PAS), Staff Health Insurance (SHI), Map Products Information System (MAPIS), Correspondence Tracking System (CTACS), Leave Tracking System (LTS), Payroll, and various Web/Intranet applications.

INSTITUTIONAL TRANSFORMATION	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES. (cont.)	
STRATEGIC PLAN 2003-2007		
OBJECTIVES	ACTIONS	STATUS
Improve accountability and transparency (cont.)	Create virtual collaborative work spaces. Sharepoint was identified as the appropriate platform to support cross-organizational teams, more efficient collaboration on preparing documents, and the consolidation of information and sharing of knowledge among groups of individuals, including external partners.	In progress – 30 collaborative sharing spaces/sites, each with 3 to 50 subsites have been created thus far and a crossfunctional team including Information Technology Services (ITS), IKM staff, and outside experts is in place.
	Outsource PAHO's mainframe computer operations to the International Computing Center (ICC) in Geneva. The ICC is a consortium of 39 U.N. organizations.	Completed. Improved response time, a more secure and reliable environment, and reduced costs.
Take measures to improve efficiency.	Implement PAHO-wide Work-flow Process Automation to improve process control and access to management information, support timely decision-making, reduce transaction time by automating the process and document work flow, and the approval processes.	Interfacing local payroll transactions in the corporate accounting system; identification of unliquidated obligations with no activity for six months for action by managers.
	Implement several tools to reduce communication and documentation distribution costs (i.e. virtual meetings, teleconferencing, Web-based resource booking tool, document management, and electronic filing PAHO-wide.	Already applied to PAHO 21st Century and Roadmap working group discussions.
	Support countries and Centers through better communication technology.	Telecommunications capacity increased in Guyana and Haiti through the installation of satellite technology. Software developed and tested in CEPIS and PANAFTOSA.
	Reduce costs.	Agreement entered with WHO for decreasing the annual PAHO share of retiree Staff Health Insurance contribution by over \$1 million.
		Net reduction of posts since 2004 and funding requirements reduced for 2006-2007. Recurring program costs and administrative expenditure absorbed into the 2004-2005 approved regular budgets.

PAHO in the 21st Century

INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES. (cont.)	
OBJECTIVES	ACTIONS	STATUS
Take measures to improve efficiency. (cont.)	Reduce costs (cont.)	By using "Cost Centers" as the unit of financial analysis, it is now possible to monitor and rationalize expenditures more effectively. Savings made in office space, technology support, and staff costs in several Country Offices. Corporate procurement cards being piloted in eight country offices by August 2005 and 36 country offices by December 2005. Corporate cards will reduce costs and time for procurement transactions. Effective July 2005 staff members' monthly payroll information provided via electronic links to a secured PAHO
Effectively manage human resources across the Organization.	Match program needs and staff competencies. - Finalize PAHO Competency Maps.	intranet site, eliminating printing and distribution costs. Competency maps finalized and HRM is now integrating these maps into the recruitment, selection, classification, and learning process at PAHO. The country learning focal points have integrated these competency maps in their 2005 learning plans.
	 Create a Learning Board, led by the Assistant Director with members from across the Organization, to define staff development priorities. Highlight leadership and management competencies for supervisors, particularly for staff development and learning activities, as well as strategic planning, knowledge management, networking and building partnerships, team leadership, performance assessment, and project management. 	The internal Learning Board was established in 2004 to advise the Staff Development Unit on the strategic use of resources for staff development to support organizational priorities. All managers at PAHO are participating in learning activities during 2004-2005 to build their skills in these areas. A change leadership program for all managers has been initiated in cooperation with the WHO Global Management and Leadership Development Program. The goal is to strengthen the leadership and management skills of all heads of Country Offices and Regional Units by end 2006.

INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES. (cont.)	
OBJECTIVES	ACTIONS	STATUS
Effectively manage human resources across the Organization. (cont.)	Develop new standards for key human resources processes.	Classification standards to evaluate local contractual agreements (CLT) and professional posts being implemented. New standards being developed for improving the management of short-term staff, including revised contractual agreements and competitive selection procedure.
	Implement a more targeted recruitment strategy.	Planning for competency-based recruitment completed and implementation to start in 2005.
	Improve working environment and capability of staff.	
	- Implement policies and procedures	The Harassment Policy issued in 2004 and the Grievance Panel established. Training to support policy implementation across the Organization in progress. Framework for Ethical Principles and PAHO Code of Conduct in preparation, to be completed by September 2005. Draft complaints procedure to be completed by September 2005. Gender parity policy. Spouse employment policy implemented. Strict compliance with staff rotation policy. Ombudsman post upgraded and under recruitment. Interim Ombudsman on board.
	 Ensure that ethical principles and standards of conduct are fully reflected in the Staff Rules and Regulations. 	Introduction of modifications to the Staff Rules and Regulations proposed (CE136/22).



