



**Pan American
Health
Organization**



**World Health
Organization**
REGIONAL OFFICE FOR THE
Americas

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FINAL REPORT

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FINAL REPORT

Opening of the Session

1. The 58th Directing Council, 72nd Session of the Regional Committee of the World Health Organization (WHO) for the Americas, was held on 28 and 29 September 2020. Owing to the extraordinary and unprecedented circumstances presented by the COVID-19 pandemic, the session was held online using a virtual meeting platform.
2. Dr. Daniel Salas Peraza (Minister of Health, Costa Rica, outgoing President) opened the session and welcomed the participants. Opening remarks were made by Dr. Salas Peraza, H.E. Ms. Mia Mottley (Prime Minister of Barbados), H.E. Mr. Iván Duque Márquez (President of Colombia), Dr. Carissa Etienne (Director, Pan American Sanitary Bureau), Mr. Alex M. Azar II (Secretary of Health and Human Services, United States of America), Mr. Luis Almagro Lemes (Secretary General, Organization of American States), Mr. Luis Alberto Moreno (President, Inter-American Development Bank), and Dr. Tedros Adhanom Ghebreyesus (Director-General, World Health Organization). Their respective speeches may be found on the webpage of the 58th Directing Council.¹

Procedural Matters

Appointment of the Committee on Credentials

3. Pursuant to Rule 31 of the Rules of Procedure of the Directing Council, the Council appointed Antigua and Barbuda, Costa Rica, and Paraguay as members of the Committee on Credentials (Decision CD58[D3]).
4. The Committee met on 28 September to review the credentials submitted by the delegations in attendance, and Dr. Rhonda Sealey-Thomas (Antigua and Barbuda, President of the Committee on Credentials) subsequently presented its report. Several delegations emphasized that, in accordance with Resolution 1117 (2200/19) of the Permanent Council of the Organization of American States (OAS), their Governments did not recognize the regime of Nicolás Maduro and that the accreditation of representatives of the Maduro administration should not be interpreted as a tacit recognition of the legitimacy of that regime. Other delegations regretted the politicization of the matter, particularly in the context of the COVID-19 health emergency, and pointed out that the United Nations and WHO had recognized Nicolás Maduro and his Government as the legitimate representatives of the Venezuelan people.
5. The Directing Council approved the report of the Committee on Credentials.

¹ Available at: <https://www.paho.org/en/governing-bodies/directing-council/58th-Directing-Council>.

Election of Officers

6. Pursuant to Rule 16 of the Rules of Procedure of the Directing Council, the Council elected the following officers (Decision CD58[D1]):

<i>President:</i>	Colombia	(Hon. Fernando Ruiz Gómez)
<i>Vice President:</i>	Grenada	(Hon. Nickolas Steele)
<i>Vice President:</i>	Honduras	(Hon. Alba Consuelo Flores Ferrufino)
<i>Rapporteur:</i>	Uruguay	(Dr. Miguel Asqueta Sóñora)

7. The Director of the Pan American Sanitary Bureau (PASB or Bureau), Dr. Carissa Etienne, served as Secretary ex officio, and the Deputy Director, Ms. Mary Lou Valdez, served as Technical Secretary.

Establishment of a Working Party to Study the Application of Article 6.B of the PAHO Constitution

8. Pursuant to Rule 34 of the Rules of Procedure, the Directing Council appointed Aruba, El Salvador, and Trinidad and Tobago as members of the Working Party to Study the Application of Article 6.B of the PAHO Constitution (Decision CD58[D2]). The Working Party subsequently presented its report as part of the Council's consideration of the report on the collection of assessed contributions (Document CD58/9, Add. II) (see paragraphs 97 to 104 below).

Establishment of the General Committee

9. It was agreed that, in light of the logistical limitations presented by the virtual meeting platform, all matters related to the orderly dispatch of the business of the Council that would ordinarily have been dealt with by the General Committee would be dealt with by the Council itself (Decision CD58[D4]).

Adoption of the Agenda (Document CD58/1)

10. The Directing Council was informed that, given the extraordinary and unprecedented circumstances presented by the COVID-19 pandemic, the proposed agenda included only those items about which decisions were required to ensure the Organization's ability to discharge its functions or to deal with the COVID-19 health emergency in the Region of the Americas.

11. The Directing Council adopted the agenda proposed by the Director (Document CD58/1) without change, together with a program of meetings (Document CD58/WP/1) (Decision CD58[D5]).

Constitutional Matters***Annual Report of the President of the Executive Committee (Document CD58/2)***

12. The Honorable Jeffrey Bostic (Barbados, President of the Executive Committee) reported on the activities carried out by the Executive Committee between October 2019 and September 2020, highlighting the items that had been discussed by the Committee but not sent forward for consideration by the 58th Directing Council and noting that he would report on other items as they were taken up by the Council. He also noted that the Subcommittee on Program, Budget, and Administration had not held its 14th Session as planned owing to the extraordinary and unprecedented circumstances presented by the COVID-19 pandemic. For the same reason, all of the Committee's deliberations in 2020 had been conducted online using a virtual meeting platform.

13. Mr. Bostic informed the Council that the Committee had held a special session on 29 May 2020 to discuss the financial crisis caused by delays in the receipt of assessed contributions and to consider several proposed measures for dealing with the situation. The Committee had also considered, and approved, a proposal for an emergency loan from the Revolving Fund for Access to Vaccines to the Revolving Fund for Strategic Public Health Supplies to enable the latter Fund to meet the demand for procurement of COVID-19 emergency supplies.

14. Mr. Bostic reported that, at its 166th Session in June 2020, the Committee had considered a reduced agenda consisting only of matters that had to be decided upon for the Organization to be able to properly discharge its functions and matters related to the COVID-19 pandemic. Three of the items considered by the Committee had not been sent forward to the Directing Council: appointment of a new member to the PAHO Audit Committee, amendments to the PAHO Staff Rules related to staff salaries and other benefits, and a report on the Master Capital Investment Fund. In relation to the latter, the Committee had been informed that, in December 2019, PAHO had purchased the building located at 2121 Virginia Avenue, across from the PAHO Headquarters building in Washington, D.C., and that the acquisition of the building was expected to save at least US\$ 1.2 million² per year in rental payments, which would reduce general operating expenses and thus benefit the Organization's program budget. Details on the Committee's deliberations on these and other matters may be found in the final reports of the various sessions.³

15. The Director expressed thanks to the President and the other Members of the Executive Committee for their service to the Organization.

16. The Council also thanked the President and the Members of the Committee for their work and took note of the report.

² Unless otherwise indicated, all monetary figures in this report are expressed in United States dollars.

³ Documents CE165/FR (2019), CESS1/FR (2020), and CE166/FR (2020).

***Annual Report of the Director of the Pan American Sanitary Bureau
(Document CD58/3)***

17. The Director introduced her annual report,⁴ the theme of which was “Saving Lives and Improving Health and Well-being.” She noted that the report covered the period from July 2019 to June 2020, a period during which PASB had faced many significant and daunting challenges. Together with all the countries of the Region, the Bureau had responded to the COVID-19 pandemic, which had disrupted almost every aspect of life, work, and business. At the same time, the Bureau had been challenged by an unprecedented financial crisis due to the delay in receipt of a significant proportion of Member State assessed contributions and a freeze on some voluntary contributions. That situation had severely tested the Bureau’s resilience and capacity to function effectively and had compelled it to implement substantial cost-containment measures while simultaneously responding to the numerous pandemic-related needs of Members States. Nevertheless, with solidarity and a deep-rooted spirit of Pan Americanism, the Region had confronted those challenges, transforming systems and processes, innovating, and producing results to improve the health of the peoples of the Americas, especially those living in conditions of vulnerability.

18. Highlighting some of the results achieved, the Director reported that the Bureau had progressed towards universal access to health and universal health coverage by promoting the leadership and governance aspects of the updated essential public health functions and helping to strengthen integrated health services delivery networks. It had continued to promote the Regional Compact on Primary Health Care for Universal Health, taking every opportunity to advocate for reducing barriers to access, increasing public expenditure on health, and allocating at least 30% of health care resources to the first level of care. In the face of disruptions in global supply chains associated with the pandemic, the Bureau had worked to ensure continued availability of essential supplies through the Organization’s procurement funds. In addition, it had made donations of COVID-19 test kits and personal protective equipment to numerous countries.

19. Progress had also been made in the elimination of communicable diseases, including HIV, hepatitis B, malaria, tuberculosis, and neglected infectious diseases such as rabies. Through its Immunization Program, the Bureau had supported countries and territories in maintaining their vaccination programs and had begun to lay the groundwork for the introduction of a COVID-19 vaccine. The Revolving Fund for Access to Vaccines had delivered 24 million doses of seasonal influenza vaccines to Member States in the southern hemisphere in order to protect their populations and limit the potential negative impacts of dual epidemics of COVID-19 and influenza during the fall and winter.

20. The Director noted that, in addition to mounting a multifaceted response to the COVID-19 emergency (see paragraphs 44 to 65 below), the Bureau had continued its work in numerous other areas, including support for efforts to address the climate crisis, particularly in the Caribbean; efforts to enhance disaster and emergency preparedness and

⁴ The full text of the Director’s speech may be found on the website of the 58th Directing Council.

response, including through strengthening of core capacities for the implementation of the International Health Regulations (2005) and intensive work to enhance pandemic influenza preparedness in the Region; ongoing work to maintain maternal, neonatal, and child health and the health of older persons; and efforts to accelerate prevention and control of noncommunicable diseases (NCDs). In the latter area, the Bureau had conducted a rapid assessment of the impact of the pandemic on NCD services and had also provided guidance on mental health and psychosocial support as part of the response not only to COVID-19 but also to the numerous severe hurricanes that had struck the Region in recent years.

21. The Bureau had striven to maintain PAHO's reputation as a trusted source of up-to-date, accurate information on public health issues, in particular COVID-19. Various activities had been implemented to support countries and territories, including the development of a curated evidence portal. The Bureau's technical cooperation had prioritized the strengthening of information systems for health, including greater disaggregation of data—necessary to identify inequities—and the adoption of digital health solutions, including telehealth. Internally, the Bureau had implemented innovations in administrative and management systems and accelerated the digital transformation already under way in order to facilitate teleworking by staff.

22. The Director concluded her presentation by noting that the health, social, and economic impacts of the pandemic would have far-reaching effects on progress towards the achievement of national, subregional, regional, and global health goals and that massive and sustained interventions would be required to control and contain COVID-19, tackle increasing poverty levels, reduce health and social inequalities, and position health at the center of equitable and sustainable development. Looking ahead, the Bureau must therefore reinforce the importance of universal health anchored in the primary health care approach as a cornerstone for building resilience.

23. In the ensuing discussion, delegates thanked the Director for her report, the theme of which was considered especially apt in the context of the COVID-19 pandemic. Delegates expressed gratitude to the Bureau for the support provided to their countries during the pandemic, including through the provision of critical medical supplies. Numerous delegates noted that the pandemic had highlighted PAHO's central role in leading the response to public health emergencies in the Region and underscored the importance of ensuring that it received the support it needed to continue fulfilling that role. Concern was expressed about ongoing delays in the payment of assessed contributions, and Member States were urged to meet their financial obligations to the Organization in a timely manner.

24. Delegates underscored the need for multilateralism, solidarity, and collaboration, stressing that no country could defeat the pandemic on its own. The importance of examining the lessons learned from the response to the pandemic in order to better prepare for future health emergencies was also emphasized. Member States were encouraged to participate in the work of the Independent Panel for Pandemic Preparedness and Response, created pursuant to Resolution WHA73.1, adopted by the Seventy-third World Health Assembly in May 2020.

25. A number of delegates observed that the pandemic had revealed weaknesses in health systems and deepened existing inequalities and inequities. The need to continue working to build resilient and inclusive health systems and achieve the goal of universal access to health and universal health coverage was underlined. To that end, it was considered essential to reinforce the primary health care approach and enhance the response capacity of the first level of care. In order to preserve the public health gains detailed in the report, it was also considered essential to continue efforts to prevent and control diseases other than COVID-19 and to address social, economic, and environmental determinants of health. The importance of multisectoral action was also stressed. It was pointed out that progress on many fronts had slowed or stopped as a result of the pandemic, which might have an impact on the Region's ability to achieve the Sustainable Development Goals. The Bureau was asked to identify possible areas for prioritization that would not further tax countries' health systems and human resources.

26. Delegates described the steps their governments had taken to strengthen their health systems and respond to the pandemic while also continuing to deal with other health problems. The Delegates of Cuba and Venezuela noted that their governments' efforts to control the pandemic had been hindered by political and economic measures imposed by the United States of America. The Delegate of the United States regretted that the Cuban and Venezuelan delegations had raised political issues in the context of the Directing Council of PAHO. He called on the Bureau and PAHO Member States to insist that Cuba should report to PAHO on its recruitment and export of medical professionals and to address allegations that it was engaging in the trafficking of such professionals.

27. Representatives of two non-State actors addressed the Council, describing their organizations' collaboration with PAHO, including in responding to the COVID-19 pandemic, and emphasizing the need for collective effort to overcome the pandemic and improve the health and well-being of the peoples of the Americas.

28. The Director affirmed that the achievements described in the report were, in fact, the achievements of Member States, not just in the past year but over the 118 years of the Organization's existence. Noting the comments made about a possible need to revise the goals and priorities established in relation to the Sustainable Development Goals, she pointed out that the Goals themselves might be revised, in which case it might indeed be necessary to revise some of the targets in the Sustainable Health Agenda for the Americas. She recommended, however, that any such modifications should be postponed until there had been a full assessment of the impact of COVID-19 on health systems and other areas. She emphasized the need to redouble efforts to bring about the paradigm shifts required to overcome problems such as social exclusion, inequities, and poverty and to be mindful of the threats posed by zoonotic diseases, microbial resistance, and climate change. She looked forward to working with Member States to achieve not only their respective national goals but also the collective goals of the Region.

29. The Directing Council thanked the Director and took note of the report.

Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Belize, Canada, and Peru (Document CD58/4)

30. The Directing Council was informed that the period of office of Belize, Canada, and Peru as Members of the Executive Committee had expired and that the election of Brazil, Cuba, and Suriname was proposed.

31. In the Council's discussion, the leadership and achievements of the outgoing Executive Committee Members were commended, and the delegates of Brazil and Suriname welcomed the opportunity to serve on the Executive Committee. The Delegate of the United States of America objected to the seating of Cuba as a Member of the Committee. Noting that the Government of Cuba faced allegations of trafficking of medical workers, she said that her delegation believed that placing that Government on PAHO's Executive Committee would be contrary to the basic principles of an organization whose mandate was to promote and protect public health. She welcomed the decision by PAHO to initiate an independent review of the Mais Médicos project, which had involved Cuban medical workers, and called on Cuba to provide a full account of its actions.

32. The Delegate of Cuba categorically denied the allegations of human trafficking. She pointed out that Cuba's international medical missions had been recognized by WHO and the United Nations and that, under the Mais Médicos project, Cuban doctors and medical personnel had ensured access to health care for millions of Brazilians. The same delegate emphasized that, as a Member State of PAHO, Cuba had the right to serve on the Executive Committee.

33. At the request of the President of the Council, the Bureau clarified that, pursuant to Rule 51 of the Rules of Procedure of the Directing Council, in elections in which the number of candidates for elective office did not exceed the number of offices to be filled, no ballot was required and such candidates should therefore be declared elected.

34. The Directing Council declared Brazil, Cuba, and Suriname elected to membership on the Executive Committee for a three-year period and thanked Belize, Canada, and Peru for their service (Resolution CD58.R5).

Program Policy Matters

Report of the End-of-biennium Assessment of the PAHO Program and Budget 2018-2019/Final Report on the Implementation of the PAHO Strategic Plan 2014-2019 (Documents CD58/5 and Add. I)

35. Mr. Dean Chambliss (Director, Department of Planning and Budget, PASB) introduced the report, noting that, while the report built on the successful experience of ensuring joint accountability, the assessment had been conducted internally by PASB alone. It had not been possible to conduct joint assessments with Member States, as had been done in 2014-2015 and 2016-2017, in a context in which countries were fully engaged in dealing with the COVID-19 emergency. Nonetheless, the Bureau stood ready to support individual national health authorities that wished to complete their own assessment and

looked forward to a resumption of the joint assessment process after the 2020-2021 biennium.

36. Highlighting some of the results achieved during the period covered by the Strategic Plan, Mr. Chambliss reported that 31% of the impact targets had been exceeded, 23% had been achieved, 19% had been partially achieved, and 27% had not been achieved. Among the latter, healthy life expectancy not only had not risen by the expected 1% but had fallen by 0.2%. Other areas in which the results achieved had fallen short of the target included mortality from causes amenable to health care, mortality from NCDs, mortality from tuberculosis, and deaths due to malaria. On the other hand, the targets relating to infant mortality, mortality from HIV/AIDS, mortality from tuberculosis, dengue case fatality, elimination of onchocerciasis and malaria in some countries, suicide rate, mortality from road traffic injuries, and reduction of crude mortality following emergencies had all been achieved or exceeded.

37. As for outcome and output indicators, Mr. Chambliss reported that 33% of the outcome indicators for the period 2014-2019 had been achieved or exceeded, 44% had been partially achieved, and 16% had not been achieved, while 59% of the output indicators for the 2018-2019 biennium had been achieved or exceeded, 34% had been partially achieved, and 5% had not been achieved. A small percentage of the outcome and output indicators had not been rated owing to a lack of data. What the analysis suggested, he noted, was that while the Bureau had effectively worked with Member States in delivering results at the output level, additional efforts were required to achieve the desired results at the outcome level.

38. With regard to budget implementation, the total approved budgets for the three bienniums included within the period covered by the Strategic Plan 2014-2019 had totaled \$1.9 billion; 94% of that amount had been financed, 86% had been available for implementation, and 83% had been implemented. Mr. Chambliss explained that the amount financed included all income that the Bureau considered in funding the program budget, even when some of the funds had not been received or were intended for use in future bienniums, whereas the amount available represented actual cash receipts. Of the funds available for implementation over the six-year period, 97% had been implemented. In the 2018-2019 biennium, \$659 million of the total approved budget of \$676 million had been financed, but only \$556 million had been available for implementation; \$546 million (98%) of that amount had been implemented. Mr. Chambliss concluded by noting that the amounts approved and available for each of the six categories in the Strategic Plan had varied greatly and that categories 2 (noncommunicable diseases and risk factors) and 3 (determinants of health and promoting health throughout the life course) had chronically been, and remained, underfunded.

39. In the discussion that followed, several delegates remarked that the evaluation afforded an opportunity to reflect on the successes achieved and the lessons learned from the implementation of the Strategic Plan 2014-2019 and to identify challenges that remained to be overcome. Delegates also noted that, while the evaluation revealed the important progress achieved at country level with the Bureau's support, it also highlighted

several areas that required greater effort, in particular the need to eliminate the persistent inequities and access barriers that led to poorer health outcomes for vulnerable and marginalized populations. It was pointed out that many equity gaps had been deepened by the COVID-19 pandemic and that the region must redouble efforts under the new Strategic Plan 2020-2025 to achieve equity in health and realize the vision of the Sustainable Health Agenda for the Americas 2018-2030. It was considered important to maintain flexibility in the implementation of the Strategic Plan in order to respond effectively to the evolving challenges of the COVID-19 pandemic.

40. One delegate, noting that the Region had made significant advances in bottom-up planning and joint evaluation, expressed concern about the Bureau's unilateral decision not to conduct a joint evaluation and instead to publish an evaluation based on information available to the Bureau, resulting in an incomplete evaluation based on insufficient technical evidence. In her view, the Executive Committee should have been allowed the opportunity to express an opinion on whether the Bureau should conduct a vertical evaluation or seek alternatives that would have enabled Member States to decide on the mechanism for evaluating achievements in the exceptional context created by the pandemic. Recalling a recommendation by the External Auditor concerning the need for a strategic approach to the management of the Organization, she called on the Bureau to reaffirm its commitment to the implementation of the joint evaluation processes agreed upon by the Governing Bodies.

41. Mr. Chambliss clarified that the decision regarding the assessment process had not been unilateral. The Bureau had launched the joint process as usual at the beginning of the year. However, Member States had overwhelmingly indicated that they would not be able to complete the exercise because of the pandemic. Since a high level of completion on the part of Member States was required in order for the exercise to be valid, it had simply not been feasible to proceed with a joint assessment. He agreed on the need to redouble efforts to protect the health gains made, particularly as a number of them were in jeopardy as a result of the pandemic. He also agreed on the importance of flexibility in implementing the Strategic Plan 2020-2025.

42. The Director, reiterating that the Bureau had not made a unilateral decision to forego the conduct of a joint assessment, recalled that the Americas had been the first WHO region to undertake such an exercise and that it had been the Bureau, not Member States, that had suggested a joint assessment. She affirmed that the Bureau fully recognized the sovereignty of Member States and was committed to working with them to achieve regional targets. It was clear that it would be necessary to revisit some of the targets that the Region had set, given the challenges of the pandemic and its economic repercussions for Member States. It would also be necessary to find more efficient and effectively ways of working. She reported that the Bureau had already begun to reexamine the impact of COVID-19 on the priority areas of work identified under the Strategic Plan 2020-2025. Its work and that of the Member State Working Group formed to consider possible revisions to the Organization's strategic priorities would feed into the planning process for the program budget for the 2022-2023 biennium.

43. The Directing Council took note of the report.

COVID-19 Pandemic in the Region of the Americas (Document CD58/6)

44. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had commended PAHO's leadership of the regional response to the pandemic and expressed thanks for the assistance and guidance that the Organization had provided to countries. Delegates had highlighted the need for a whole-of-government approach to address the pandemic's social and economic consequences as well as its impacts on health and health systems. The importance of strengthening health systems and ensuring continuity of care for health problems other than COVID-19 had been stressed. Delegates had also stressed the importance of adhering to the International Health Regulations (IHR), ensuring equitable access to medicines and vaccines for COVID-19, and working together to overcome the pandemic. The Committee had voiced strong support for the lines of action recommended in the document and the actions proposed in the accompanying resolution. Accordingly, the Committee recommended that the Directing Council adopt the resolution contained in Document CD58/6.

45. Two presentations were made on this item, one by Dr. Ciro Ugarte (Director, Department of Health Emergencies, PASB) and the other by Dr. Jarbas Barbosa (Assistant Director, PASB). Dr. Ugarte presented an overview of the COVID-19 situation in the Americas and of PAHO's response to the pandemic. He noted that the Region remained at the epicenter of the pandemic and continued to account for the highest number of COVID-19 cases and deaths in the world. Following a peak in late July, the numbers of cases and deaths had fallen somewhat, but the numbers had begun to rise again in recent weeks. He pointed out that the sharp rise in cases in some countries in mid-July, notably those of the Caribbean, had coincided with a resumption of international flights. Many countries were therefore seeking recommendations regarding the resumption of non-essential travel, one of the issues that had arisen in the discussions on the proposed resolution on this item.

46. Dr. Ugarte then highlighted some aspects of the Organization's response to the pandemic, which was based on nine pillars: *a)* coordination, planning, and monitoring; *b)* risk communication and community engagement; *c)* surveillance, rapid response teams, and case investigation; *d)* points of entry; *e)* national laboratories; *f)* infection prevention and control; *g)* case management; *h)* operational support and logistics; and *i)* maintaining essential health services during the pandemic. He also drew attention to some of the positive results achieved, noting, for example, that all 35 Member States had a functioning multisectoral, multi-partner coordination mechanism for COVID-19, in-country capacity or access to an international laboratory, and a clinical referral system to provide care for patients with COVID-19. In addition, a number of countries had dramatically increased the capacity of their intensive care units, thanks to which the proportion of deaths among COVID-19 patients had declined.

47. Nevertheless, a number of challenges remained, in particular with regard to surveillance capacity, decision-making related to measures to mitigate risks associated

with the resumption of non-essential international travel, laboratory capacity, implementation of infection prevention and control practices, case management, procurement and distribution of personal protective equipment and diagnostic supplies, and maintenance of essential health services during the pandemic and beyond. Another major challenge was the implementation and maintenance of non-pharmaceutical measures, which had succeeded in flattening the epidemic curve and delaying its peak, but had also created a false sense of security, which had caused people to let down their guard and led to pressure to relax the measures adopted.

48. Concluding his presentation, Dr. Ugarte said that the Bureau expected that there would be recurring waves and outbreaks in countries and subregions in the coming months, occurring simultaneously or at different points in time, as countries progressively reopened their economies. To jointly tackle COVID-19 in the Americas, the Bureau proposed that action should be strengthened in four key areas: *a)* leadership, stewardship, and governance; *b)* epidemic intelligence; *c)* health systems and service delivery networks; and *d)* emergency operations response and supply chains. The principal measures and activities to be implemented were described in Document CD58/6.

49. Dr. Barbosa then presented a broader description of some of the challenges that the Region faced in responding to the pandemic and provided an update on progress in developing a vaccine. He pointed out that the Region was grappling not only with a public health crisis but also with an economic and social crisis. As a result of the pandemic, economic growth in Latin America and the Caribbean was expected to decline and poverty and extreme poverty were expected to increase significantly. Consequently, more than a decade of growth could be lost and progress in reducing poverty could be set back by 14 years.

50. Maintaining the continuity of priority public health programs while continuing to battle the pandemic was another important challenge. Surveys had shown significant disruptions in various services, including antenatal care, family planning services, immunization, and diagnosis and treatment of NCDs. At the same time, the pandemic had increased the need for some services, most notably mental health services. Countries had adopted various strategies, including triaging and telemedicine, to enable health services to continue operating.

51. Dr. Barbosa pointed out that the pandemic had highlighted the need for policies to eliminate the longstanding inequities that existed in the Region, noting that certain population groups—indigenous and Afrodescendent populations, for example—had been disproportionately affected. The pandemic had also revealed weaknesses and challenges with regard to information systems for health, including a lack of interoperability for real-time data access and sharing, lack of connectivity, and outdated legislation and regulations relating to telemedicine and contact tracing.

52. Dr. Barbosa outlined some of the actions called for in the proposed resolution annexed to Document CD58/6, underlining in particular the need to initiate preparatory activities in anticipation of a COVID-19 vaccine and develop guidance to ensure equity in

the global allocation of COVID-19 therapeutics and vaccines. He also highlighted the need to strengthen the response capacity of the first level of care and identify access barriers and implement strategies to provide coverage to populations in conditions of vulnerability. He then drew attention to some of the lessons learned from the experience of the pandemic, notably the need to strengthen information systems, consolidate comprehensive and universal social protection systems, reduce the dependency of Latin American and Caribbean countries on imported medical products in order to better equip them to confront future health crises, and strengthen interregional solidarity.

53. In conclusion, Dr. Barbosa presented an update on COVID-19 vaccine development, noting that 10 of the 191 candidate vaccines had reached phase 3 of the clinical trial process as of 28 September 2020 and that a number of countries in the Americas were participating in the trials. He also outlined the steps that the Bureau was taking to support Member States in engaging with global initiatives such as the Access to COVID-19 Tools Accelerator and to ensure affordable access to the vaccine through the COVID-19 Vaccines Global Access (COVAX) Facility. He reported that PAHO was working with the United Nations Children’s Fund (UNICEF) and the Gavi Alliance to develop an overall procurement strategy and was providing technical cooperation to assist countries in preparing for the introduction of the vaccine. He emphasized that the Bureau would continue to work with vaccine suppliers to ensure access after the acute phase of the pandemic.

54. In the Directing Council’s discussion of this item, delegates applauded PAHO’s leadership of the response to the pandemic in the Americas and expressed appreciation for the critical resources, support, and technical advice it had provided to countries. Delegates also expressed thanks to other countries for their support. Several delegates noted their countries’ need for ongoing support and guidance as they continued to grapple with the health, economic, and social impacts of the pandemic. The need for guidance on the resumption of non-essential international travel, in particular, was highlighted. Such guidance was considered especially crucial for countries whose economies depend heavily on tourism. The need for tools to assess surge capacity requirements was also noted.

55. Numerous delegates described the measures their countries had implemented in response to the pandemic, with several noting the importance of community-based approaches to risk communication, prevention, detection of cases, contact tracing, and surveillance. It was considered essential to maintain control measures and react quickly to increases in case numbers in order to prevent successive waves of disease. One delegate highlighted the benefits of a syndromic approach to surveillance of viral respiratory illnesses in general, rather than a focus on a single disease. The Delegates of Cuba and Venezuela noted that political and economic measures imposed by the United States had hindered their access to medicines, supplies, and equipment for patient care. The Delegate of the United States said that her Government regularly authorized the export of medicines, medical equipment, and other humanitarian supplies to Cuba and that it maintained several exemptions under its Venezuela sanctions program to facilitate humanitarian support.

56. Many delegates underlined the importance of strengthening and enhancing the resilience of health systems, not only to deal with the current situation, but also to be prepared to contend with future pandemics and other health emergencies. Numerous delegates also stressed the need for a multisectoral, whole-of-government approach in order to address the pandemic's social and economic consequences as well as its health-related impacts. The importance of maintaining health services such as immunization and of ensuring continuity of care for health problems other than COVID-19 was also noted. A number of delegates remarked on the need to strengthen mental health services in response to the upsurge in mental health problems that had arisen in connection with the pandemic.

57. It was pointed out that, while the pandemic had caused enormous damage, it had also created opportunities. One delegate observed that the response to the pandemic had strengthened the relationships of ministries of health with private-sector players and civil society and that those relationships could be leveraged to accelerate and expand work on other public health issues, such as NCDs, childhood obesity, violence, and mental health. Another delegate expressed the hope that the greatly increased international policy collaboration that had occurred during the pandemic would remain as a positive legacy of the situation. Various delegates commented that the response capacity of their countries' health systems had been substantially increased as a result of the pandemic.

58. Delegates stressed the importance of adherence to the IHR and of timely and transparent sharing of accurate information. The importance of developing and maintaining IHR core capacities was also emphasized. One delegate noted that his country had not closed its borders, in line with IHR, which called on States Parties to avoid unnecessary interference with international traffic and trade. He pointed out that border closures were unlikely to help curb transmission, given the nature of the disease and the phenomenon of globalization.

59. Collective effort, unity, solidarity, and multilateral cooperation were considered essential in order to end the pandemic. Delegates underscored the need to ensure equitable access to medicines and vaccines for COVID-19, with many noting that their countries were participating in the COVAX Facility. The Bureau was urged to strive to ensure timely access to safe and effective vaccines at the lowest possible prices. It was also asked to support countries in formulating immunization plans, strengthening their cold chains, and reinforcing their immunization information systems. A delegate pointed out that, in preparation for the introduction of a COVID-19 vaccine, it would be important to continue working to discredit the myths that fuel vaccine refusal.

60. Representatives of various non-State actors (NSAs) stressed the need to ensure continued care for persons with chronic noncommunicable diseases, pointing out that such diseases put people at higher risk of severe illness and death if they contracted COVID-19. The NSA representatives also emphasized the need for evidence-based information to guide decision- and policymaking, transparency regarding vaccine research and development costs, sharing of technology, and equitable and affordable access to COVID-19 medicines and vaccines. Several also underlined the need to address

longstanding inequalities and inequities that had been exposed and exacerbated by the pandemic.

61. Strong support was expressed for the lines of action recommended in Document CD58/6, although it was suggested that PAHO's COVID-19 response should incorporate a stronger analysis of the differential impact of the pandemic on women and girls and on adolescents and young people. It was also recommended that future guidance on the response should be in line with Resolution WHA65.8, on the outcome of the World Conference on Social Determinants of Health, which called for action to reduce health inequities. Support was also voiced for the proposed resolution included in the document, although a number of amendments were submitted to reflect comments made during the discussion.

62. Dr. Ugarte noted that PAHO had been working closely with WHO and numerous other partners in various sectors since the start of the pandemic. Bureau staff in all departments and areas, in the country offices, and in the specialized centers had been available constantly to support Member States, both technically and administratively. He pointed out, however, that the staff could do their work effectively only if they had transparent information from all countries.

63. Dr. Barbosa commended Member States on their responses to the pandemic, but noted that many challenges remained to be overcome. He also highlighted the need to evaluate the measures implemented in order to be better prepared to deal with future emergencies.

64. The Director, affirming that the pandemic was a multifaceted crisis requiring a multisectoral response, said that the Bureau had been pleased and privileged to accompany Member States in their battle against COVID-19 and would continue to work with national authorities to provide evidence-based guidelines to support policy decisions and actions at the national level. It would also work with Member States to strengthen solidarity and the sharing of experience and best practices; to facilitate access to technology, including vaccine technology; and to build stronger, better-financed, more resilient, and more equitable health systems. She noted in that connection that the Bureau had launched a repository that was collecting information on guidelines, challenges, actions taken, lessons learned, and best practices. She believed that the Organization had a responsibility to organize such information, both as a historical record and for the use and benefit of future generations.

65. An informal consultation took place to review the various proposed amendments to the resolution contained in Document CD58/6 and reach consensus on the final text. The amended resolution (Resolution CD58.R9) was then adopted by the Council.

PAHO Governance Reform (Documents CD58/7 and Add. I)

66. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had welcomed the proposal on governance reform, which had been put forward by the United States of America with a view to strengthening the management

of technical cooperation projects funded by voluntary contributions. Executive Committee Members had seen the proposal as a means of strengthening risk management, transparency, and accountability and protecting the Organization from potential financial, legal, operational, technical, and reputational risks associated with projects funded by voluntary contributions. The Executive Committee had agreed, however, that emergency projects related to disease outbreaks and humanitarian or other crisis response should be exempt from the review process so as not to delay emergency response activities. The Executive Committee had requested the Director to conduct a review of risk assessment, management criteria and frameworks, and recommended that the Directing Council adopt a resolution requesting the Director to seek recommendations from the Executive Committee on any proposed technical cooperation project funded by voluntary contributions that was expected to require an annual expenditure or receipt of funds exceeding \$25 million or that might entail a high level of institutional risk.

67. Mr. Gerald Anderson (Director of Administration, PASB) explained that the purpose of the proposal on governance reform was to refine and strengthen the rules and procedures that the Bureau had already established to consider the risks associated with proposed voluntary cooperation agreements. Document CD58/7 included a proposed resolution outlining a new procedure relating to the largest and highest-risk voluntary contribution project proposals. The document also reported on the internal and external assessments of existing rules and procedures that had been conducted at the request of the Executive Committee. Mr. Anderson noted that a report on the internal assessment was to be presented to the Executive Committee at its 167th Session in September 2020.

68. He informed the Council that, for the external assessment, the Bureau had engaged an independent expert whose report appeared in Document CD58/7, Add. I. The report included 17 recommendations for strengthening the Bureau's risk management process for voluntary contribution projects. The Bureau had formed a working group, which was reviewing the recommendations and would prepare an action plan based thereon. An update on actions taken and lessons learned would be presented to the Executive Committee at its 168th Session in June 2021. The areas of focus for the action plan were described in paragraphs 5 to 7 of Document CD58/7. The revisions to be made to the policy framework, oversight mechanisms, and project cycle procedures for voluntary contribution projects would ensure that all high-risk projects were identified and that the associated risks were documented and considered by senior management prior to the conclusion of grant agreements.

69. In the ensuing discussion, delegates voiced solid support for the governance reform proposal, which was seen as a means of improving risk management and strengthening transparency and accountability. Delegates expressed appreciation to the Government of the United States for putting forward the proposal and to the Bureau for undertaking the assessments of existing risk management procedures.

70. It was considered essential to protect the Organization from financial, legal, and reputational risks that might damage its prestige. It was suggested that the Office of the Legal Counsel should be more involved in identifying the risks associated with projects

funded by voluntary contributions and in project control and oversight. In addition, it was considered necessary to strengthen staff hotlines and whistleblower protection so that staff would be willing to speak up if they became aware of project-related risks. A delegate reaffirmed his delegation's view—initially expressed during the 166th Session of the Executive Committee—that Member States should have the opportunity to arrive at a common understanding of what was meant by “institutional risk” and reiterated his delegation's request that the Bureau should formulate and present to the Governing Bodies a proposed definition and a set of impartial criteria for determining what might constitute such a risk.

71. Most delegates endorsed the recommendations formulated by the external expert, particularly those relating to national voluntary contributions and to the reestablishment of a project support unit within the Bureau. It was suggested that the Bureau should develop a timetable for implementing the recommendations of the external expert and for reporting to the Governing Bodies on their implementation.

72. However, the Delegate of Brazil pointed out that the analysis and recommendations of the external consultant focused heavily on the risks associated with projects funded by national voluntary contributions and presented such projects, particularly those carried out in Brazil, in a negative light. He also noted that the recommendations focused almost exclusively on financial risks, ignoring other types of institutional risks. His delegation did not believe that the recommendations should be implemented automatically without considering the deficiencies of the analysis and called on the Bureau to develop risk management criteria that would be applicable to all types of risks and projects funded by all types of voluntary contributions.

73. The Delegate of Cuba said that the delegation of the United States had politicized the work of the Council and attempted to damage Cuba's relations with PAHO by imposing an external review of the Mais Médicos project without such a review having been approved by the Governing Bodies. He noted that Cuba had not been informed in advance of the review, despite having been one of the main actors involved in the project.

74. Delegates generally supported a stronger oversight role for the Executive Committee in reviewing projects entailing high levels of expenditure or institutional risk to PAHO. However, one delegate cautioned that it was important for Member States to trust the executive management of the Bureau and not to try to micromanage the Bureau's work. She pointed out that the assessments undertaken had shown that a solid framework for the design of voluntary contribution projects was in place. Another delegate expressed concern about the costs that the project review and risk management process would have for the Organization, especially in view of the resource constraints it faced. She also asked how \$25 million had been determined to be the expenditure level that would require a review of a project by the Executive Committee.

75. Mr. Anderson explained that the \$25 million threshold for review of projects had been decided during the Executive Committee's deliberations on the governance reform

proposal. During those discussions, concerns had been expressed about the potential costs to the Bureau of reviewing and preparing reports for the Executive Committee on all voluntary contribution projects, regardless of size. A threshold of \$25 million had been considered a reasonable level to protect against excessive costs.

76. He noted that the internal working group had conducted some preliminary work on an information technology system that would enable the Bureau to manage the risks associated with voluntary contribution projects efficiently. The working group was also developing a timeline for the implementation of the recommendations of the external expert, which would be presented to the Executive Committee in June 2021. The group would establish criteria for risk management of proposals and would implement a consistent process to ensure that the legal advisor, the risk management adviser, and all other key officials within the Bureau were involved in the process of considering new proposals.

77. The Director assured the Council that the Bureau recognized the sovereignty of Member States in governing the organization of PAHO and welcomed the proposed governance reforms aimed at enhancing transparency and accountability and strengthening risk management as it related to projects funded by both national voluntary contributions and voluntary contributions. She looked forward to presenting the plan of action for the implementation of the recommendations of the external expert.

78. At the same time, she did not wish Member States to be left with the impression that the Bureau had no mechanisms in place to ensure transparency and accountability. On the contrary, it demonstrated its accountability to Member States every year through the annual report of the Director, the financial report of the Director, and the reports of the Audit Committee, the External Auditor, the Internal Auditor, the Investigations Office, the Ethics Office, and the Department of Human Resources Management. Moreover, the Bureau regularly presented reports on the plans of action and other initiatives approved by the Governing Bodies and it actively engaged Member States in the development, implementation, and evaluation of the Organization's five-year strategic plans and biennial program budgets. Her aim, and that of the other members of Executive Management, was to make PAHO the most transparent and accountable organization in the world.

79. Responding to the comments made by the Delegate of Cuba, the Director explained that the review of the Mais Médicos project was an administrative review of the work of the Bureau; it was not an audit of PAHO or of any Member State and therefore had not required the approval of the Organization's Governing Bodies. Nevertheless, she had endeavored to inform the countries that had participated directly in the project and had sought advice from other Member States.

80. The Directing Council adopted Resolution CD58.R3, requesting the Director to seek and fully consider recommendations from the Executive Committee on any proposed technical cooperation project funded by voluntary contributions expected to require an annual expenditure or receipt of funds exceeding \$25 million or that might entail a high level of institutional risk.

Current Financial Situation and Adjustments to the Pan American Health Organization Strategic Priorities (Document CD58/8)

81. Ms. Stacy Goring (Barbados, Representative of the Executive Committee) reported that, during its Special Session on 29 May 2020, the Executive Committee had examined a report on the financial crisis caused by delays in the payment of assessed contributions and considered several proposed measures for dealing with the situation. The Bureau had described the measures that had already been taken to reduce costs and presented several proposals for further cost reductions, together with several borrowing options that would enable the Organization to continue functioning until the end of the year. The Bureau had also suggested that the Executive Committee should form a working group of Member States to review the Organization's strategic priorities and budget allocations for 2020-2021, bearing in mind that the delays in receipt of assessed contributions would most likely make it impossible to fulfill those priorities. The Executive Committee had authorized the Director to borrow up to \$15 million from the Master Capital Investment Fund in order to finance expenses under the Program Budget for 2020-2021 and to implement a temporary staff furlough scheme as a cost-saving measure. The Executive Committee had also agreed to establish the Member State Working Group and had asked the Director, in consultation with the Working Group, to prepare a broad package of austerity measures.

82. Mr. Dean Chambliss (Director, Department of Planning and Budget, PASB) summarized the content of Document CD58/8 and its Annex B, which reported on the current financial situation of PAHO and the austerity measures implemented. He noted that, in the light of a significant improvement in the Organization's financial situation in July 2020 (see the report on collection of assessed contributions, paragraphs 97 to 104 below), the Member State Working Group had reoriented its work, a summary of which was presented, together with the Group's recommendations, in Annex A of the Document CD58/8. The Bureau's internal deliberations had also shifted, focusing less on immediate, short-term cost reductions and more on ensuring a sustainable financial future for PAHO, including keeping prudent cost-containment measures in place pending the receipt of additional assessed contribution payments. He pointed out that the document did not include the detailed report requested by the Executive Committee on the consequences that would ensue if the Organization did not receive the assessed contributions due nor did it have access to external borrowing, as the request was no longer applicable.

83. Providing an update on the information presented in the document, Mr. Chambliss reported that the amount of assessed contributions owed as of 21 September 2020 had been \$87.8 million, substantially less than the \$164.6 million outstanding at the end of April 2020. The reduction was due to the receipt of a large part of the arrears from 2019 as well as a portion of the 2020 contributions. Nevertheless, the balance due was notably higher than in previous years.

84. Mr. Chambliss recalled that, in light of the deficit in flexible funding projected in April 2020, expenses had been heavily curtailed through cost-containment or austerity measures. However, the situation had improved considerably in mid-August, and the

projected budget deficit had fallen from \$85.4 million to \$29.5 million, with no cash flow deficit. If the financial situation continued to improve, it might be possible to progressively ease the austerity measures in place. In any case, he assured the Council that the Bureau was well positioned to ensure financial solvency throughout the 2020-2021 biennium, while adjusting its technical cooperation delivery to the new reality. Given the financial costs of the COVID-19 crisis, however, the Bureau foresaw a challenging environment in the 2022-2023 biennium.

85. Regarding the technical cooperation implications of the financial situation, Mr. Chambliss noted that the austerity measures implemented, together with the COVID-19 emergency, had significantly affected the Organization's capacity to deliver technical cooperation. Among other impacts, programs heavily dependent on flexible funds had seen their capacity greatly reduced and filling of key vacant positions responsible for core functions had been put on hold. However, the Bureau had adopted new and innovative modalities of delivering technical cooperation, which, together with cost savings in some areas, had somewhat offset the activity reductions resulting from the austerity measures.

86. Mr. Nicolas Palanque (Canada, Chair of the Member State Working Group) presented the report of the Member State Working Group established to review PAHO's strategic priorities for 2020-2021. He noted that the original aim of the Working Group had been to provide input and advice to the Director regarding the strategic priorities to be pursued by the Organization in the worst-case funding scenario. The Working Group had also been tasked with considering revisions to the strategic priorities as a consequence of the COVID-19 crisis, if deemed necessary. As the worst-case funding scenario had been averted following the receipt of a large assessed contribution payment in mid-July 2020, the Working Group had decided to focus its work on reviewing priorities in the light of the COVID-19 pandemic. The Bureau had been requested to present a review of the potential public health and economic consequences of the pandemic in the Region and its effects on PAHO technical cooperation with Member States. The Working Group had concluded that the Strategic Plan 2020-2025 priorities should remain in place, but that the Bureau should continue adjusting its technical cooperation in order to strengthen its response to the current emergency, preserve and boost public health capacities during the protracted crisis, and strengthen the resilience of national health systems.

87. The Working Group recommended that any adjustments to the provision of technical cooperation to Member States should be implemented under the delegated authority of the Director. The Working Group also recommended the formation of an informal ad hoc group to contribute to the analysis of current and future technical priorities for the COVID-19 response and associated public health challenges.

88. In the discussion that followed, delegates welcomed the improvement in the PAHO's financial situation and expressed appreciation to the Bureau for the steps taken to enable the Organization to continue functioning despite the severe financial constraints it had faced. At the same time, delegates acknowledged that the Organization's financial situation remained precarious and stressed the need for Member States to pay their assessed contributions in full and on time in order to ensure a sustainable financial future for PAHO.

It was considered especially critical to provide the Organization with the financial wherewithal to enable it to continue supporting Member States in the response to the COVID-19 emergency.

89. Delegates thanked the Working Group for its work and expressed firm support for its recommendations, including the recommendations concerning resumption of the normal corporate planning and budgeting processes and recognition of the Director's authority to make decisions on the Organization's structure and the reallocation of resources to ensure that the Bureau could continue to respond to Member States' technical cooperation needs. Nevertheless, the Director was encouraged to continue applying austerity and cost-containment measures and to continue using tools that had proven effective during the pandemic—such as virtual meetings—to generate additional administrative efficiencies.

90. A delegate suggested that the Bureau should, in consultation with Member States, identify measures for further enhancing efficiency and ensuring that resources were directed mainly towards technical cooperation with countries. As part of that process, she suggested that the Director should undertake a review of the organizational structure in order to eliminate duplications of functions at PAHO Headquarters. She requested the Director to present a proposal to the Governing Bodies in that regard. The same delegate stressed the need to ensure that operational costs generated by projects funded by national voluntary contributions did not affect the availability of flexible funds obtained from other sources.

91. Firm support was expressed for the formation of an informal ad hoc group to provide a space for technical discussions on the response to COVID-19 and on current and future priorities. A delegate suggested that the Member State Working Group should be converted into a technical advisory group that would explore at a more granular level what PAHO should and should not do to address future financial challenges and public health emergencies and to provide advice on how the Organization could be more effective and efficient. She emphasized that PAHO must focus on Member States' priorities, although she also pointed out that Member States should become more disciplined in terms of what they asked of the Organization.

92. Another delegate inquired whether the impact of the cost reduction measures on the Organization's priority countries had been analyzed and whether any distinction would be made in the application of such measures depending on whether or not countries were up to date in meeting their financial obligations.

93. Mr. Chambliss said that every effort had been made to protect the priority countries from the impact of the austerity measures implemented and affirmed that there was no relationship between the application of austerity measures and the payment of assessed contributions. He assured the Council that the Bureau intended to keep the austerity measures in place for the remainder of the 2020-2021 biennium and would adjust them as needed in keeping with the financial situation and the receipt of assessed contributions. The Bureau would keep Member States informed about the situation as it evolved.

94. He noted that the presentation of the program budget proposal for 2022-2023, to be submitted to the Governing Bodies in 2021, would offer an opportunity to review the unusual experience of the 2020-2021 biennium, both in financial terms and in terms of the response to the COVID-19 crisis. He also noted that a number of internal initiatives were under way to ensure that PAHO was fit for purpose, including a review of the Bureau's structure. The outcome of those initiatives would be reflected in the 2022-2023 program budget proposal.

95. The Director thanked the Member States that had paid their assessed contributions and encouraged those that had not to do so or to enter into a payment plan. She also thanked the countries that had participated in the Member State Working Group. She confirmed that the Bureau would take action on the formation of the ad hoc group, noting that the deliberations of that group could feed into the proposed working group of Member States for the development of the next biennium planning. She assured Member States that she was aware of the need to ensure that the Organization remained fit for purpose and became more relevant, efficient, and effective in the delivery of technical cooperation.

96. The Directing Council took note of the report.

Administrative and Financial Matters

Report on the Collection of Assessed Contributions (Documents CD58/9 and Add. I and Add. II)

97. Ms. Stacy Goring (Representative of the Executive Committee) reported that the Executive Committee had been informed that, as of June 2020, outstanding assessed contributions due from Member States, Participating States, and Associate Members had amounted to \$160.3 million, including \$66.1 million that remained outstanding for 2019. During the first half of 2020, only \$33.9 million had been collected. One Member State had been in arrears to the extent that it could be subject to the application of the provisions of Article 6.B of the PAHO Constitution. She added that the level of unpaid assessed contributions was unprecedented in the history of the Organization and that the situation had brought PAHO to the brink of insolvency. Cost-containment measures and other steps had been taken to enable PAHO to continue operating, albeit at a minimal level, until the end of 2020. However, the Executive Committee had been told that, unless a significant proportion of the outstanding assessed contributions was received, far more radical steps would be required in 2021 to curtail the Organization's activities and reduce its staff.

98. Mr. Xavier Puente Chaudé (Director, Department of Financial Resources Management, PASB) confirmed that one Member State was in arrears to the extent that it was now subject to Article 6.B of the PAHO Constitution. He reported that 23 Member States, Participating States, and Associate Members had paid in full and six had made partial payments for 2020. However, 13 States had yet to make any payments at all for 2020, even though assessed contributions were due on 1 January of each year.

99. As of 28 September, the Organization had collected \$106.5 million in assessed contributions, \$67.7 million of which related to amounts outstanding from prior years. Only

\$38.8 million, or 37%, of the contributions due for 2020 had been collected. The Organization was facing the second highest shortfall in assessed contributions in its history, with \$87.7 million still outstanding for current and prior years. As a result of the dire financial situation, the Bureau had been forced to utilize the entirety of the \$25 million in the Working Capital Fund and \$24 million from other unrestricted funds, in order to meet its financial obligations. Mr. Puente Chaudé emphasized that any significant delays in collecting assessed contributions seriously affected the Organization's capacity to carry out its activities and urged States with pending contributions to pay them in an expeditious manner.

100. Dr. Carlos Alvarenga (El Salvador, President of the Working Party to Study the Application of Article 6.B of the PAHO Constitution) reported that the Working Party had reviewed the status of assessed contribution collections and had found that one Member State, the Bolivarian Republic of Venezuela, was more than two full years in arrears in the payment of its assessments and was therefore subject to the suspension of its voting privileges, pursuant to Article 6.B of the PAHO Constitution. The Working Group had considered information provided by the Member State concerned, according to which its failure to pay was due to conditions beyond its control. The Working Group had been informed that the Member State had submitted a 20-year payment plan to the Bureau on 24 September 2020. The Bureau had indicated that it had yet to discuss the proposed plan with the Member State due to its late submission and it had never in its history approved a payment plan of such length.

101. Dr. Alvarenga added that the Working Party had also noted the recommendations made in Resolution CE166.R4, adopted by the Executive Committee during its 166th Session in June 2020, and the serious impact that the non-payment of assessed contributions was having on the Organization and its financial stability. Accordingly, the Working Party had recommended by a majority vote that the suspension of voting privileges provided under Article 6.B should be applied, subject to review at a future session of the Directing Council. One member of the Working Party had dissented, finding that the failure of the Member State to pay its contributions was due to conditions beyond its control and calling on all Member States to find a way to facilitate the transfer of the necessary funds.

102. In the discussion that followed, several delegates expressed their concern about the late payment of assessed contributions and the resulting consequences for PAHO's operations and, indeed, for its very survival, although one delegate pointed out that the current status of contributions was comparable to that of previous years. It was underscored that delays in the payment of contributions not only jeopardized the Organization's ability to meet its mandate and implement its program of work in the Region, including at country level, but also undermined its capacity to provide critical support in the current context of the COVID-19 pandemic. Member States were therefore exhorted to pay their assessed contributions in full and on time. Several delegates noted that their Governments had paid their assessed contributions, despite the enormous economic costs inflicted by the pandemic.

103. The Director commended those Member States that had paid their assessed contributions. She noted that the budgetary process assumed that all payments would be made by 1 January and pointed out that the lack of predictability as to the timing of payments made it difficult for the Bureau to manage the Organization's resources appropriately and ensure that it could provide technical cooperation when needed.

104. The Council adopted Resolution CD58.R8, expressing appreciation to those Member States that had made payments in 2020, urging all Member States in arrears to pay their outstanding balances as soon as possible, and requesting the Director to notify the Delegation of the Bolivarian Republic of Venezuela that, pursuant to Article 6.B of the PAHO Constitution, its voting rights had been suspended.

Financial Report of the Director and Report of the External Auditor for 2019 (Official Document 360)

105. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had been informed in June that the Financial Report of the Director and the Report of the External Auditor for 2019 had not yet been published, the reason being that the level of outstanding assessed contributions as of the publication deadline in April 2020 had been so high that the External Auditor would most likely have issued a qualified audit opinion. In order to avoid the potential negative consequences of an unfavorable opinion, the External Auditor had agreed to delay issuing an opinion until there was greater clarity regarding the Organization's financial situation and the recoverability of the outstanding contributions. Executive Committee members had acknowledged the reasons for the delay in publishing the Financial Report but had expressed concern about the lack of financial information for 2019 and the implications of the delay in terms of the perceived transparency and credibility of the Organization and its accountability to Member States. The Bureau had been asked to keep Member States informed of the Organization's financial situation, including details about where expenditure levels were being reduced as a result of the non-payment of assessed contributions.

Financial Report of the Director for 2019

106. Mr. Xavier Puente Chaudé (Director, Department of Financial Resources Management, PASB) presented an overview of the Financial Report of the Director, including figures on total revenue and expenditure, collection of assessed contributions, voluntary contributions, and procurement on behalf of Member States. He confirmed that the audit opinion had been delayed as there was concern as to whether PAHO continued to enjoy the financial support of its Member States and remained a "going concern." However, following the receipt of a significant portion of the outstanding assessed contributions in July 2020, the Organization had finally received a clean, unqualified audit opinion.

107. Total revenue in 2019 had amounted to \$1,194 million, a 14% decrease with respect to 2018, which was due primarily to the reduction of national voluntary contributions from Brazil. Program budget revenue for the year had totaled \$284.8 million, which was comparable to the total for 2017, the second year of the previous biennium. In that regard,

Mr. Puente Chaudé noted that revenue in the second year of a biennium was normally higher than in the first year. He also noted that miscellaneous income had been higher in 2019 than in 2018 or 2017, owing to the favorable evolution of exchange rates. Voluntary contributions had also increased, rising from \$73.3 million in 2018 to \$95.7 million in 2019. The Organization had ended the biennium with a revenue surplus of \$7.5 million and a budget surplus of \$5.7 million. The programming of the two surpluses was discussed by the Council under separate agenda items—see paragraphs 131 to 140 below.

108. With regard to the collection of assessed contributions, Mr. Puente Chaudé reported that receipts of current-year and prior-year assessed contributions in 2019 had totaled only \$30.2 million and \$35.7 million, respectively, bringing the total collected to \$65.9 million, 37% less than in 2018, when the total had been \$104.9 million. Arrears at the end of 2019 had amounted to \$88.9 million, double the amount of arrears at the end of 2018. As a result of that situation, it had been necessary to curtail or postpone numerous activities, and the entirety of the Working Capital Fund and the majority of the Special Fund for Program Support Costs had been expended to finance the Organization's operations.

109. Turning to revenue from non-program budget sources, Mr. Puente Chaudé reported that revenue from voluntary contributions had risen from \$73.3 million in 2018 to \$95.7 million in 2019. Both PAHO and WHO voluntary contributions had grown. National voluntary contributions, on the other hand, had fallen significantly, mostly as a result of the decrease in revenue in 2019, mainly due to the reduction of activities in the *Mais Médicos* project. Funds received for procurement on behalf of Member States had also increased. The Revolving Fund for Access to Vaccines had accounted for the vast majority of procurement-related revenue: \$761.2 million out of a total of \$833.7 million. That total was 23% higher than in 2018 and was the highest amount of procurement-related revenue ever recorded in the Organization's history.

110. Expenditures for 2019 had totaled \$1,189 million, versus \$1,369 million in 2018, resulting in a 13% decrease. As in previous years, purchases of supplies, commodities, and materials had accounted for the largest share of expenditure in 2019. The vast majority of those purchases had been made on behalf of Member States through the Organization's procurement funds. Travel expenses had decreased by 29% with respect to 2018. Travel for purposes of technical cooperation had accounted for the majority of the total travel expenditure.

111. Lastly, Mr. Puente Chaudé reported that the net staff health insurance liability in 2019 had totaled \$270.3 million, versus \$198.8 million in 2018. He explained that the change was largely the result of a reduction in the discount rate, which in turn had resulted in a change in the actuarial valuation of the liability.

Report of the External Auditor for 2019

112. Mr. Damian Brewitt (Financial Audit Director–International, National Audit Office of the United Kingdom and Northern Ireland) introduced the report of the External Auditor, confirming that the Auditor's opinion on the Organization's financial statements had been

unqualified, meaning that the audit had revealed no errors or weaknesses that had been considered material to the accuracy, completeness, or validity of the statements. The audit had nevertheless identified some areas where controls could be further enhanced, and the auditors had made recommendations aimed at enhancing the content of the financial report and statements.

113. Highlighting various findings and recommendations with regard to financial management, governance and internal control, and human resources management, Mr. Brewitt noted that the COVID-19 pandemic had added to the existing financial pressures on the Organization and said that the External Auditor believed that efficiency savings must be an integral part of managing those pressures. The External Auditor had noted that steps had been taken to increase efficiency and would review progress in that regard over the coming year. The External Auditor also believed that there remained scope for a more strategic approach towards PAHO's estate. In particular, the Bureau should take account of the lessons learned from new ways of working during the pandemic and consider the future opportunity costs of refurbishing buildings, the availability of funds to renovate and maintain buildings in the medium to long term, and the potential to realize the value of capital assets.

114. The most notable recommendation in the area of financial reporting related to the need for the Bureau to review its approach to accounting for receivable assets to ensure that the financial statements reflected their recoverability. Under the International Public Sector Accounting Standards (IPSAS), the fair value of assets must be reported. The External Auditor therefore recommended that the Bureau should ensure that Member States were not involved in accounting judgements relating to the value of outstanding debt. To enhance transparency, the External Auditor had highlighted the potential to further develop the content of the financial report of the Director in order to provide a broader view of performance, more closely aligning the reporting of the use of resources and the key outcomes.

115. Regarding governance and internal control, the External Auditor noted that, while many key aspects of good governance were present, greater use could be made of the functionalities of the PASB Management Information System (PMIS) to enhance compliance. To that end, the Bureau should ensure continued investment in training of PMIS users. There was also room for the enhancement of risk management, particularly at the local and project management levels. The External Auditor remained concerned that PAHO had not yet operationalized policies it had developed in respect of anti-fraud risk assessment and response plans.

116. The External Auditor had noted limited progress in implementing the Bureau's human resources strategy, known as the People Strategy, and recommended that the Strategy should be reviewed regularly to ensure that it remained relevant. Performance review should be linked to the competence-based approach adopted, and compliance with the requirement for regular staff appraisals should be enforced. Greater emphasis should also be placed on compliance with mandatory training requirements, particularly in areas such as communicating the organizational approach to harassment. In addition, the use of

consultants and other non-staff personnel—some of whom remained in their posts for 10 years or more—should be reviewed.

117. In conclusion, Mr. Brewitt expressed concern about the pace of implementation of past audit recommendations. He noted that, while PAHO's financial position and COVID-19 had impacted on management capacity, the External Auditor believed that there was scope for a clearer articulation of how the Bureau would implement recommendations. The Auditor also believed that greater scrutiny of implementation plans by the Audit Committee could provide important insights and an opportunity to review the continued relevance of recommendations.

118. Member States welcomed the unqualified audit opinion, which was seen as a significant achievement in the context of the COVID-19 pandemic and the financial challenges that PAHO had experienced. The technical achievements highlighted in the report were also welcomed. Concern was again expressed about the delay in releasing the report, which in the view of one delegate had seriously impacted the principle of transparency. The External Auditor believed that there was a need for a more robust transparency framework that would enable Member States to have greater clarity regarding the administrative and financial decisions taken by the Bureau.

119. It was noted that, while the Organization had experienced some financial instability in 2020, it had ended 2019 in a good financial position. Notwithstanding that positive result, however, the Bureau was encouraged to continue seeking efficiencies and pursue cost-saving measures. It was pointed out that, while travel expenses had decreased—which was seen as a positive trend—there had been a significant increase in staff and general operational costs. The Bureau was encouraged to find ways to reduce staff-related costs, including long-term employee benefit liabilities. It was suggested that the Director should develop and present to the Governing Bodies an austerity plan that would include a proposal for reducing non-priority expenses and eliminating duplications in the organizational structure of PAHO Headquarters. At the same time, concern was expressed about the low level of assessed contribution collections, and the importance of paying contributions in full, on time, and without conditions was emphasized.

120. The Bureau was urged to implement all of the External Auditor's recommendations, in particular those relating to risk analysis and mitigation, anti-fraud policies, and human resources. It was considered especially important to address the issue of harassment and to enforce mandatory training requirements. The need for more rigorous and transparent processes for the recruitment of non-staff personnel was also highlighted, as was the need for a stronger succession plan.

121. The Delegate of Brazil, noting the large reduction in national voluntary contributions resulting from the conclusion of the Mais Médicos project, pointed out that such projects were carried out internally by a country using its own resources and that the recent downward trend in national voluntary contributions had not been responsible for the Organization's financial difficulties, which were due to a variety of factors. He also noted that projects funded by national voluntary contributions did not entail any particular

financial risks for the Organization, nor were the risks associated with such projects greater than those associated with projects funded by voluntary contributions.

122. Mr. Puente Chaudé explained that the delay in closing some of the recommendations was due in part to the fact that the External Auditor had wished to have confirmation during the year of the activities undertaken with respect to each recommendation, and in the context of the COVID-19 pandemic it had been difficult to demonstrate how some activities were being carried out. With regard to staff-related costs, he noted that salaries had risen by only 2% to 3% in 2019 and that the increase had been the result of the updating of the actuarial study conducted to determine the staff benefit liability. He also pointed out that expenditure in all areas was generally higher in the second year of a biennium than in the first year. He emphasized that the delay in releasing the financial report was unrelated to a lack of transparency. Until July, the External Auditor had been unable to confirm that PAHO continued to enjoy the financial support of its Member States and would therefore have issued an unfavorable audit opinion. The Bureau had therefore opted to delay the publication of the report in order to avoid the consequences of such an opinion. Mr. Puente Chaudé stressed that the Bureau had worked continually to enhance transparency and accountability to Member States and would continue to do so.

123. Mr. Brewitt observed that auditors tended, by nature, to be skeptical and wished to see substantive evidence of the implementation of recommendations. The External Auditor understood that the Organization was operating in challenging times, which might have hindered its progress in implementing some of the recommendations. The External Auditor would conduct another review of progress made towards the implementation of the recommendations in the coming year. Meanwhile, he believed that the Audit Committee had a valuable role to play both in monitoring the implementation of recommendations and in assessing whether they remained relevant.

124. The Director expressed thanks to Member States for the trust they had placed in her administration and to the External Auditor for its work with the Bureau to improve its fulfillment of its administrative and managerial responsibilities. She assured Member States that the executive management of the Bureau was firmly committed to maintaining the highest standards of transparency and accountability and to ensuring the implementations of the recommendations of the External Auditor, the Internal Auditor, and the Audit Committee.

125. The Directing Council took note of the report.

Status and Authorized Level of the Working Capital Fund (Document CD58/10)

126. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had considered a proposal to raise the authorized level of the Working Capital Fund from \$25 million to \$50 million in order to cover temporary cash shortfalls resulting from delays in the payment of Member States' assessed contributions. The Executive Committee had expressed general support for the proposal, acknowledging the usefulness of the Working Capital Fund to cover temporary cash deficits. At the same time, concern had been voiced about the potential for the proposal to lead to an increase in

spending and a decrease in the funding available for technical cooperation. It had been explained, however, that the Working Capital was used exclusively to cover cash shortfalls and that increasing the authorized level of the Fund would not increase spending. In light of the clarifications provided, the Committee had decided to recommend that the Directing Council approve the proposed increase in the authorized level of the Working Capital Fund.

127. Mr. Xavier Puente Chaudé (Director, Department of Financial Resources Management, PASB) confirmed that the sole purpose of the Working Capital Fund was to cover temporary cash shortfalls when there were delays in the receipt of assessed contributions. He explained that the level of contributions outstanding at the end of the fiscal year had been increasing, rising from \$44.4 million in 2017 to \$88.9 million in 2019. The current authorized level of the Working Capital Fund was therefore no longer sufficient. In August, the Bureau had been forced to use not only the entire \$25 million balance in the Working Capital Fund but also \$24 million from other unrestricted funds in order to meet the Organization's financial obligations. The proposed increase in the authorized level of the Working Capital Fund would better enable the Bureau to continue providing technical cooperation when payments of assessed contributions were delayed.

128. In the discussion that followed, a delegate restated the concern he had raised during the Session of the Executive Committee in June 2020, namely that the authorized level of the Fund had historically risen as the Organization's budget had increased, which implied an increase in spending. He was also concerned that increasing the balance in the Working Capital Fund could have implications for the Organization's program budget and decrease the amount of money available for technical cooperation activities. To alleviate those concerns, he suggested that the Director should be asked to regularly present a report to the Governing Bodies on the manner in which cash flow shortfalls were covered and the programmatic areas that were financed from the Working Capital Fund. He suggested that the proposed resolution should be amended to include wording to that effect. Another delegate supported that proposal and asked whether the Bureau could also present a plan detailing the proposed use of funds from the Working Capital Fund.

129. In response, the Director reiterated that the Working Capital Fund served primarily as a buffer against the late receipt of assessed contributions. She pointed out that the Bureau would have no need to make use of the Working Capital Fund if Member States paid their assessed contributions in a timely manner. She recalled that, in accordance with the Organization's Financial Regulations, assessed contributions were due on 1 January of each year. The shortfalls in funding caused by the delayed payment of contributions by Member States were unpredictable, for which reason it would be difficult to present a plan on the proposed use of the Fund.

130. The Directing Council adopted Resolution CD58.R1, as amended, approving an increase in the authorized level of the Working Capital Fund, from \$25 million to \$50 million.

Programming of the Budget Surplus (Document CD58/11)

131. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had been informed that, although the Bureau had estimates of the anticipated budget surplus for the 2018-2019 biennium, it was not able to provide official figures because the External Auditor had not yet certified the Organization's financial statements for 2019. The Bureau had therefore recommended postponing the consideration of the budget surplus until after the Financial Report of the Director and the Report of the External Auditor for 2019 had been published. Accordingly, the Committee had agreed to postpone consideration of the use of the budget surplus until the Directing Council.

132. Mr. Dean Chambliss (Director, Department of Planning and Budget, PASB) explained that, according to PAHO Financial Regulation 4.6, any budget surplus was to be used first to replenish the Working Capital Fund to its authorized level. The budget surplus for the 2018-2019 biennium was \$5,737,970.47; as of 31 December 2019, the balance of the Working Capital Fund had been \$21,716,450.37. Since the Directing Council had adopted Resolution CD58.R1, increasing the authorized level of the Working Capital Fund from \$25 million to \$50 million, it was proposed that the entirety of the budget surplus balance should be used to replenish the Working Capital Fund.

133. The Directing Council adopted Resolution CD58.R2, approving the allocation of the budget surplus of \$5,737,970.47 to replenish the Working Capital Fund.

Programming of the Revenue Surplus (Document CD58/12)

134. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that, as with the budget surplus (see paragraph 131 above), the Executive Committee had agreed to postpone consideration of the use of the revenue surplus until the Directing Council.

135. Mr. Dean Chambliss (Director, Department of Planning and Budget, PASB) explained that, according to PAHO Financial Regulation 4.8, any excess of revenue over the budgeted miscellaneous revenue at the end of a budgetary period was to be considered a revenue surplus and was to be available for use in subsequent financial periods. The total amount available for programming in 2020-2021 from the revenue surplus for the 2018-2019 biennium was \$7,504,914.21. Of that amount, it was proposed to allocate \$4,650,520.21 to the Master Capital Investment Fund, \$1 million of which was earmarked for the Vehicle Replacement Subfund; \$1 million to the PAHO Emergency Epidemic Fund; and \$600,000 to the production of *Health in the Americas*, the Organization's flagship publication. The remaining \$1,254,394 was to be used to replenish the Working Capital Fund.

136. In the Council's discussion of this item, a delegate expressed her support for the proposed allocation of the revenue surplus and, in particular, welcomed the decision to allocate some of that amount to the PAHO Emergency Epidemic Fund. Another delegate requested further information as to the rationale for allocating \$1 million to the Vehicle Replacement Subfund. He pointed out that, according to Document CE166/11, in 2019 the Subfund had been used to purchase replacement vehicles for a total cost of \$260,985 and

that, as of 31 December, it still had a balance of \$179,875. He therefore wondered whether the \$1 million might be put to better use elsewhere, such as to further capitalize the PAHO Emergency Epidemic Fund. He also wondered how the allocations being made to the Master Capital Investment Fund in general accorded with the overall roadmap for the implementation of the Master Capital Investment Plan.⁵ In addition, he sought more information on the proposed allocation of \$600,000 to the *Health in the Americas* publication.

137. Mr. Gerald Anderson (Director of Administration, PASB) recalled that the Vehicle Replacement Subfund had been set up several years earlier to support the implementation of the Vehicle Replacement Plan, which had established a replacement schedule of five years or 75,000 kilometers. However, the amount of funding in the Subfund had not been sufficient for the full implementation of that Plan, and for that reason the Bureau was proposing the \$1 million allocation from the revenue surplus.

138. With regard to the Master Capital Investment Plan roadmap, he explained that the recommendation to allocate funding from the revenue surplus to the Master Capital Investment Fund was in keeping with recent practice, aimed at building up sufficient funds to complete the implementation of the Master Capital Investment Plan. He noted that the capital expenditure required to ensure that PAHO Headquarters and PAHO/WHO representative offices were safe, secure, and efficient workspaces had been calculated at approximately \$60 million. In 2019, renovations had been carried out at Headquarters to implement state-of-the-art access controls and thus mitigate security threats, in line with the recommendations of the United Nations Department of Safety and Security. However, no other such projects had been conducted owing to the need to sufficiently capitalize the Master Capital Investment Fund. He added that a new roadmap was to be published in the forthcoming year, with updated costings for the remaining projects to be implemented under the Plan.

139. The Director recalled that, at the 29th Pan American Sanitary Conference in 2017, it had been explained that, in addition to its print publication, *Health in the Americas* was being transformed into an interactive online platform (*Health in the Americas+*) that could be regularly updated. The aim was to make *Health in the Americas* more responsive to the real needs of Member States and others seeking reliable information about health in the Region of the Americas. Noting that the print editions of the publication cost up to \$2 million to produce, she explained that the Bureau was requesting \$600,000 from the revenue surplus to improve the Organization's flagship publication, including by enhancing its online platform.

140. The Directing Council provided its concurrence to the allocation of the revenue surplus as proposed in Document CD58/12 (Decision CD58[D6]).

⁵ See Document CE156/24, Rev. 1 (2015).

Amendments to the Financial Regulations and Financial Rules of PAHO (Documents CD58/13 and Add. I)

141. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had considered several proposed amendments to the Organization's Financial Regulations and Financial Rules, which were intended to ensure better alignment with the International Public Sector Accounting Standards. In response to queries raised during the Executive Committee's discussion of the item, the Bureau had underscored that the amendments were intended to improve transparency, in line with the recommendations of the External Auditor. It had also noted that information on the status of internal borrowing of funds to cover delays in the payment of assessed contributions would be reported in the financial statements presented to the Governing Bodies. Accordingly, the Executive Committee had adopted Resolution CE166.R2, confirming the amendments to the Financial Rules of PAHO and recommending that the Directing Council approve the amendments to the Financial Regulations.

142. Mr. Xavier Puente Chaudé (Director, Department of Financial Resources Management, PASB), outlining the proposed amendments, said that Financial Regulation 13.6 would provide the Director with the authority to impair any receivable, other than assessed contributions, by establishing a reserve for doubtful accounts. Financial Regulation 13.7 would establish the criteria for PAHO Member States to impair outstanding assessed contributions considered to be at risk. He pointed out, however, that those amendments had been proposed in June, before the report of the External Auditor had been published. As detailed in pages 77 and 78 of that report, the External Auditor was of the view that, to be in compliance with the International Public Sector Accounting Standards, decisions on impairment of receivable assets for both assessed contributions and other receivables must be considered against objective criteria, and that accounting judgments should be the purview of the Bureau and should not be subject to the decision-making or review processes of Member States. The External Auditor had therefore recommended that the Executive Committee's recommendation to approve the amendments to the Financial Regulations should be reviewed.

143. In the Council's discussion of this item, a delegate welcomed the Bureau's efforts to align PAHO's Financial Regulations with the International Public Sector Accounting Standards. He noted that the changes would result in the authority to stipulate a reserve for doubtful accounts related to any assets other than assessed contributions and to establish a reserve for doubtful assessed contributions. He also noted that the Report of the External Auditor stipulated that the International Public Sector Accounting Standards did not differentiate between receivables due from Member States or any other receivable, and instead required an objective assessment based upon experience, known issues, and the circumstances of the debtor to ensure that the statements reported the fair value of the asset. With that in mind, he requested the Bureau to reformulate the amendments to Financial Regulations 13.6 and 13.7 to align them with the External Auditor's recommendations.

144. Mr. Xavier Puente Chaudé drew the attention of Member States to Document CD58/13, Add. I, which contained a revised version of the proposed amendments to

Financial Regulations 13.6 and 13.7 that was in accordance with the recommendations of the External Auditor.

145. The Director added that the revised version of the text had been drawn up in consultation with the External Auditor.

146. The Council adopted Resolution CD58.R7, approving the amendments to the PAHO Financial Regulations pertaining to the impairment of assets, as set forth in Document CD58/13, Add. I.

Update on the Appointment of the External Auditor of PAHO for 2022-2023 (Document CD58/14)

147. Ms. Stacy Goring (Representative of the Executive Committee) reported that the Executive Committee had considered a proposal to reappoint the current External Auditor, the National Audit Office of Great Britain and Northern Ireland, for the 2022-2023 biennium. The Executive Committee had also been informed that past practice had been to extend the appointment of the External Auditor for an additional biennium, subject to its satisfactory performance and willingness to be reappointed, both of which were true in the case of the current External Auditor. Delegates had recognized the high standard of excellence demonstrated by the National Audit Office and expressed their support for its reappointment. It had been pointed out, however, that best practice among international organizations was to limit the appointment of External Auditors to a single term of four to six years that could not immediately be renewed. It had therefore been recommended that the Governing Bodies should consider amending PAHO's Financial Regulations to reflect such term limits.

148. Mr. Gerald Anderson (Director of Administration, PASB) affirmed that past practice had been to appoint the External Auditor for two bienniums, with the option of reappointment for an additional biennium. In line with that practice, the Bureau recommended that the appointment of the National Audit Office should be extended for an additional term of two years.

149. The Directing Council took note of the report.

Review of the Charge Assessed on the Procurement of Public Health Supplies for Member States (Document CD58/15)

150. Hon. Jeffrey Bostic (Representative of the Executive Committee) reported that the Executive Committee had considered a proposal by the Bureau to change the composition the charge assessed on the procurement of public health supplies in order to ensure that the administrative costs associated with operating the Organization's procurement funds were fully covered. Delegates had expressed appreciation for the Bureau's efforts to ascertain the true operational costs of supporting the procurement activities financed through the funds and acknowledged the need to ensure that the Bureau was able to recoup those costs. It had been suggested that it might be preferable to raise the charge by 0.5%, which would make it possible to increase the administrative component without reducing the

capitalization component. However, the Bureau had explained that it was considered important to maintain the charge assessed on the procurement of public health supplies at its current level in order to ensure that Member States' ability to procure vaccines and other supplies through the funds was not negatively affected, especially in the context of the COVID-19 pandemic. In the light of those explanations, the Executive Committee had endorsed the proposed change and recommended that the Directing Council approve it.

151. Mr. John Fitzsimmons (Chief, Revolving Fund Special Program for Access to Vaccines, PASB) recalled that the Bureau had been asked by the 52nd Directing Council to report at the end of each biennium on the use of the 1.25% administrative component of the 4.25% charge assessed on the procurement of public health supplies. Document CD58/15 constituted the report for the 2018-2019 biennium. The report outlined the progress achieved during the biennium to sustain Member States' access to quality life-saving vaccines and strategic health supplies at significant cost-savings. In addition, it described the ongoing internal process of improving the Bureau's demand and supply management tools, simplifying and automating processes, and establishing digital platforms to continue increasing the value that the procurement funds provided to Member States.

152. As noted in the report, the operational costs for the Organization's procurement mechanisms had been calculated at \$14.5 million. That calculation considered only the costs of Headquarters personnel who devoted at least 70% of their time to the operations of the three mechanisms. An internal analysis had revealed that the actual personnel costs had amounted to about \$20.5 million in 2018-2019. Those costs were projected to increase to at least \$24 million in the current biennium. The Bureau therefore proposed that the internal composition of the 4.25% fee should be adjusted, increasing the administrative component from 1.25% to 1.75% and reducing the capitalization component from 3.0% to 2.5%.

153. Member States voiced support for the proposal, acknowledging that the operating and personnel costs of the procurement funds had risen as a result of increased demand for vaccines and other public health supplies purchased through the funds and the expansion of technical cooperation and support services provided to Member States in connection with the funds. It was considered essential to ensure that the mechanisms remained self-sustainable and that the Bureau was able to recoup the full costs associated with operating them. At the same time, it was emphasized that the Bureau should continue to seek administrative efficiencies and ensure that resources were directed mainly towards fulfilling the Organization's mission and assisting Member States technically and financially. It was also considered crucial, particularly in the context of the pandemic, to ensure that Member States were able to access the capital accounts of the three mechanisms in order to rapidly procure needed public health supplies.

154. Mr. Fitzsimmons, thanking Member States for their support, affirmed that the Bureau would do all in its power to ensure equitable access to the COVID-19 vaccine when it became available.

155. The Director, noting that the procurement funds were an important part of the Bureau's technical cooperation and had become even more important in the context of the pandemic. She assured the Council that the Bureau would continue striving to ensure greater efficiencies and to provide the highest standard of service to Member States.

156. The Council adopted Resolution CD58.R4, approving the proposed change in the internal composition of the 4.25% fee assessed on the procurement of public health supplies.

Selection of Member States to Boards and Committees

Election of Two Members to the Advisory Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME) (Document CD58/16)

157. The Directing Council declared Colombia and Costa Rica elected as nonpermanent members of the BIREME Advisory Committee for a three-year term commencing 1 January 2021 and thanked outgoing members Barbados and El Salvador for their service (Resolution CD58.R6).

158. The Delegate of Colombia said that it was an honor for his country to serve as a member of the BIREME Advisory Committee. Another delegate expressed appreciation for the work of BIREME, in particular its efforts to facilitate access to scientific, technical, and health information through its Virtual Health Library portal.

Matters for Information

Implementation of the International Health Regulations (Document CD58/INF/1)

159. Dr. Ciro Ugarte (Director, Department of Health Emergencies, PASB) summarized the information presented in Document CD58/INF/1, noting that it complemented Document CD58/6, on the COVID-19 pandemic in the Region of the Americas (see paragraphs 44 to 66 above) and the report on International Health Regulations presented to the World Health Assembly in May 2020 (WHO Document A73/14). The document presented information on the acute public health events of international concern reported from July 2019 to June 2020 and on the status of the core capacities of States Parties. In regard to the latter, Dr. Ugarte noted that, for all 13 core capacities, the average regional scores for the countries of the Americas were above the global averages, although there continued to be significant weaknesses in the area of radiation emergencies.

160. He pointed out that the COVID-19 pandemic was the archetype of the acute public health event for which the International Health Regulations had been conceived and that the pandemic had put the application of virtually all IHR provisions to the test. At the same time, it had created opportunities to ensure sustained investment in health and boost State Parties' confidence in steering the application of and compliance with the Regulations. The document identified recurrent issues that had arisen in the application of the IHR and outlined some possible adjustments to be made in 10 areas. In conclusion, Dr. Ugarte noted that various review processes were being conducted to assess the implementation of the

IHR and the response to the pandemic. In particular, the Independent Panel for Pandemic Preparedness and Response (IPPC) had been established in June 2020 and an IHR Review Committee had been convened pursuant to Resolution WHA73.1, on the COVID-19 response.

161. In the discussion that followed Dr. Ugarte's report, delegates highlighted the binding nature of IHR and underscored the need for all States Parties to fully meet their obligations under the Regulations, in particular with regard to verification and transparent sharing of information. A delegate noted that, although the Regulations called for the provision of a public health response to public health problems and the avoidance of unnecessary interference with international traffic and trade, one of the principal measures applied in response to the COVID-19 pandemic had been border closures, a political measure that could result in the stigmatization of people because of their ethnic origin. Another delegate pointed out that, in accordance with Article 2 of the Regulations, such measures must be applied in ways that were commensurate with and restricted to public health risks.

162. The importance of continuous effort to strengthen and maintain core capacities was emphasized. A delegate drew attention to the need to enhance capacities with regard to epidemiological intelligence and sentinel surveillance, noting the advantages of such an approach over simple case counts, given the impossibility of identifying everyone affected by a disease. Delegates called on the Bureau to continue providing technical cooperation to enable countries to strengthen their core capacities. The Bureau was also asked to provide support to foster a greater understanding of voluntary external evaluations and encourage more countries to undertake such evaluations.

163. Delegates agreed on the need to evaluate the response to the COVID-19 pandemic and consider how the IHR could be strengthened in order to ensure that the world would be better prepared to detect and respond to future pandemics and other health emergencies. At the same time, it was considered important not to forget that the IHR already included measures of great importance that were based on lessons learned globally over decades. The Delegate of the United States reported that her Government had prepared a roadmap for reviewing the COVID-19 response and for strengthening WHO's global emergency preparedness and response capacity and increasing its accountability, transparency, and overall effectiveness in addressing new and emerging threats. Another delegate expressed support for the short-, medium-, and long-term actions proposed in the roadmap. A third delegate stressed the importance of undertaking an in-depth review and implementing measures that would ensure, through a strengthened IHR, more equitable support in addressing health emergencies through a joint approach that prioritized the countries with the greatest health and financial difficulties. The Bureau was requested to ensure that the views of the Member States of the Americas were conveyed to the IHR Review Committee.

164. Several specific potential measures to improve implementation and compliance with the Regulations were suggested, including coordinated actions to strengthen multinational participation in the face of pandemics or other public health events of potential international concern, mechanisms addressing the situation of foreigners in a

country when a public health event of international concern is declared, and policies for assisting vulnerable populations during such events. It was suggested that a universal review mechanism for IHR compliance to track States Parties' compliance might help to incentivize implementation of the Regulations while also serving to identify areas for improved technical assistance. At the same time, it was emphasized that any compliance evaluation mechanisms should build on the strong foundation of the IHR monitoring and evaluation framework. A delegate requested clarification of the procedures for including or excluding experts proposed by the countries of the Region for appointment to the various IHR committees, in particular the IHR Emergency Committee.

165. Dr. Ugarte noted that, while the majority of the countries in the Region had shared information on COVID-19 in a timely and complete manner, there were still challenges to be overcome, particularly with regard to delays in sharing sufficient information. With regard to the procedure for selection of experts for IHR committees, he recalled that the matter had been under discussion for several years and that, during various regional consultations on the Regulations, the IHR Secretariat had been asked to explain the procedure for inclusion and exclusion of experts. He noted that, at present, experts from 10 countries in the Region were included in the IHR Roster of Experts. Concerning the process for reviewing and updating the Regulations, he suggested that countries of the Region might wish to agree on recommendations for improving the exchange of information with the Secretariat and other procedures.

166. The Director observed that the value of the IHR had been clearly demonstrated during the COVID-19 pandemic, but that the deficiencies in the implementation of the Regulations had also been recognized. There was an obvious need for further assessment of the response by Member States and for a review of the IHR themselves. She assured Member States that the Bureau would continue to work with them to strengthen their core capacities and to transmit their suggestions to the Review Committee and to the WHO Secretariat. She appealed to Member States to engage actively in the discussions on the IHR so that their experiences could be brought to bear in the review.

167. The Council took note of the report.

Other Matters

168. During the 58th Directing Council, no other matters were discussed.

Closure of the Session

169. Following the customary exchange of courtesies, the President declared the 58th Directing Council closed.

Resolutions and Decisions

170. The following are the resolutions and decisions adopted by the 58th Directing Council:

Resolutions

CD58.R1: Status and Authorized Level of the Working Capital Fund

THE 58th DIRECTING COUNCIL,

Having examined the *Status and Authorized Level of the Working Capital Fund* (Document CD58/10);

Having noted that the Director has replenished the Working Capital Fund to its current authorized level of US\$ 25.0 million;

Aware of the need for a buffer for unforeseeable, extraordinary expenses as provided for in the Financial Regulations of PAHO;

Considering the recommendation of the Executive Committee concerning an increase in the authorized level of the Working Capital Fund, in recognition of the rate of receipt of assessed contributions, as well as the need to ensure that the Program Budget is carried out in an efficient and orderly manner,

RESOLVES:

1. To approve an increase in the authorized level of the Working Capital Fund from \$25.0 million to \$50.0 million.
2. To authorize the Director to finance the increase in the Working Capital Fund from any surplus of revenue over expense as a result of efficiencies realized in the implementation of the Program Budget (budget surplus).
3. To request the Director to regularly present a report to the Governing Bodies on the manner in which cashflows from the Working Capital Fund are covered and the programmatic areas that are financed from it.

(Second meeting, 28 September 2020)

CD58.R2: Programming of the Budget Surplus

THE 58th DIRECTING COUNCIL,

Having considered the report of the Director on the *Programming of the Budget Surplus* (Document CD58/11);

Having considered the recommendation of the Executive Committee concerning the replenishment of the Working Capital Fund to its authorized level,

RESOLVES:

1. To approve the allocation of the 2018-2019 budget surplus totaling US \$5,737,970.47 as follows:
 - a) \$5,737,970.47 to replenish the Working Capital Fund to its authorized level of \$50 million, in accordance with Financial Regulation 4.6.

(Second meeting, 28 September 2020)

CD58.R3 PAHO Governance Reform

THE 58th DIRECTING COUNCIL,

Having reviewed the document *PAHO Governance Reform* (Document CD58/7);

Recognizing the importance of further strengthening of PAHO management of technical cooperation projects funded by voluntary contributions so as to increase oversight and accountability to Member States, and to protect the Organization from institutional risks, including financial, legal, operational, technical, and reputational risks,

1. To thank the Director of the Pan American Sanitary Bureau for the advances made, and for the policies and procedures implemented to promote good governance, transparency, and accountability throughout the Organization.
2. To request the Director to:

RESOLVES:

- a) seek and fully consider Executive Committee recommendations on any proposed technical cooperation project funded by voluntary contributions (including national voluntary contributions) that is expected to require an annual expenditure or receipt of funds by the Organization exceeding US\$ 25 million or presents a high level of institutional risk (including financial, legal, operational, technical, and reputational risks); this will require that the Director provides a synopsis to the Executive Committee, including a summary of the proposed project, its risk assessment results, and the results of its internal review process;
- b) prepare a document to be presented at the 168th Session of the PAHO Executive Committee in June 2021 describing lessons learned from implementation of the above requests.

(Second meeting, 28 September 2020)

CD58.R4: Review of the Charge Assessed on the Procurement of Public Health Supplies for Member States

THE 58th DIRECTING COUNCIL,

Having considered the *Review of the Charge Assessed on the Procurement of Public Health Supplies for Member States* (Document CD58/15);

Recognizing the increasing demand from Member States for access to vaccines and strategic public health supplies, and noting the transformational projects that the Pan American Sanitary Bureau has undertaken to improve demand and supply management tools, to leverage technology that can simplify and automate processes and improve quality and speed, and to establish digital platforms that deliver real-time information to Member States;

Noting that the expenditures on operation of the three procurement mechanisms of the Pan American Health Organization (PAHO) —the Revolving Fund for Access to Vaccines (Revolving Fund), the Regional Revolving Fund for Strategic Public Health Supplies (Strategic Fund), and reimbursable procurement on behalf of Member States— reported for the 2018-2019 biennium represented a 74% increase over the prior period, and that an internal analysis of the full cost of personnel time, both at PAHO Headquarters and in PWR Offices, estimated the actual personnel costs for operation of the procurement mechanisms at approximately US\$ 20.5 million;

Noting with concern that there is an ongoing need to ensure sustainability of the three procurement mechanisms, considering the full costs of technical cooperation activities and investments to improve the quality and efficiency of service;

Recognizing the need to adjust the internal composition of the 4.25% fee to increase the administrative component of the service charge from 1.25% to 1.75% and decrease the capitalization component from 3.00% to 2.50%,

RESOLVES:

1. To authorize the Director to:
 - a) adjust the internal composition of the 4.25% fee to increase the administrative component of the service fee to 1.75% and decrease the capitalization component to 2.50%, effective 1 January 2021; this change will apply to the 4.25% fee on net purchases made by the Revolving Fund, the Strategic Fund, and the reimbursable procurement mechanism;
 - b) credit the increase in the administrative component (0.50%) to the Special Fund for Program Support Costs to defray the operating and management costs generated throughout the Organization by the Revolving Fund, the Strategic Fund, and the reimbursable procurement mechanism;

- c) decrease by the same percentage (0.50%) the credit to the Capital Accounts of the Revolving Fund, the Strategic Fund, and the reimbursable procurement mechanism.

(Third meeting, 29 September 2020)

CD58.R5: Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Belize, Canada, and Peru

THE 58th DIRECTING COUNCIL,

Bearing in mind the provision of Articles 4.D and 15.A of the Constitution of the Pan American Health Organization;

Considering that Brazil, Cuba, and Suriname were elected to serve on the Executive Committee upon the expiration of the periods of office of Belize, Canada, and Peru,

RESOLVES:

1. To declare Brazil, Cuba, and Suriname elected to membership on the Executive Committee for a period of three years.
2. To thank Belize, Canada, and Peru for the services rendered to the Organization during the past three years by their delegates on the Executive Committee.

(Fourth meeting, 29 September 2020)

CD58.R6: Election of Two Members to the Advisory Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME)

THE 58th DIRECTING COUNCIL,

Bearing in mind that Article VI of the Statute of BIREME establishes that the Advisory Committee of BIREME is to be comprised of one representative appointed by the Director of the Pan American Sanitary Bureau and one by the Government of Brazil as permanent members, and that five nonpermanent members are to be selected and named by the Directing Council or the Pan American Sanitary Conference of the Pan American Health Organization (PAHO) from among the BIREME membership (which at this time includes all PAHO Member States, Participating States, and Associated States), taking geographical representation into account;

Recalling that Article VI further states that the five nonpermanent members of the BIREME Advisory Committee should be rotated every three years, and that the Directing

Council or the Pan American Sanitary Conference of PAHO may indicate a shorter rotation period in cases where it is necessary to maintain balance among members of the Advisory Committee;

Considering that Colombia and Costa Rica were elected to serve on the BIREME Advisory Committee beginning 1 January 2021, due to the completion of the term of Barbados and El Salvador,

RESOLVES:

1. To declare Colombia and Costa Rica elected as nonpermanent members of the BIREME Advisory Committee for a three-year term (2021-2023).
2. To thank Barbados and El Salvador for the services provided to the Organization by their delegates on the BIREME Advisory Committee over the past three years.

(Fourth meeting, 29 September 2020)

CD58.R7: Amendments to the Financial Regulations and Financial Rules of PAHO

THE 58th DIRECTING COUNCIL,

Having considered the recommendation of the Executive Committee and the proposed amendments to the Financial Regulations of the Pan American Health Organization as they appear in Addendum I to Document CD58/13;

Taking into consideration that the amendments to the Financial Regulations would align the Organization with the requirements contained in IPSAS 29, specifically with regard to the impairment of assets to ensure that they are reported at a fair value,

RESOLVES:

To approve the amendments to the Financial Regulations of the Pan American Health Organization pertaining to the impairment of assets as set forth in Addendum I of Document CD58/13, and to make these amendments effective immediately.

(Fourth meeting, 29 September 2020)

CD58.R8: Collection of Assessed Contributions

THE 58th DIRECTING COUNCIL,

Having considered the report of the Director on the collection of assessed contributions (Documents CD58/9 and Add. 1), and the concern expressed by the 166th Session of the Executive Committee with respect to the status of the collection of assessed contributions;

Noting that the Bolivarian Republic of Venezuela is in arrears in the payment of its assessed contributions such that it is subject to Article 6.B of the Constitution of the Pan American Health Organization;

Noting that as of 29 September 2020, 13 Member States have not made any payments towards their 2020 assessed contributions;

Noting that as of 29 September 2020, only 37% of the current year's assessed contributions have been received, forcing the Organization to utilize the Working Capital Fund and other unrestricted resources,

RESOLVES:

1. To take note of the report of the Director on the collection of assessed contributions (Documents CD58/9 and Add. 1).
2. To express appreciation to those Member States that have already made payments in 2020.
3. To strongly urge all Members with outstanding balances to meet their financial obligations to the Organization in an expeditious manner in order to efficiently implement the Program Budget for 2020-2021.
4. To request the President of the Directing Council to notify the Delegation of the Bolivarian Republic of Venezuela that its voting rights have been suspended as of this 58th Session of the Directing Council.
5. To request the Director to:
 - a) continue to monitor the status of assessed contributions and the impact of delays on the financial health of PAHO;
 - b) advise the Executive Committee of Member States' compliance with their financial commitments to the Organization;
 - c) report to the 59th Directing Council on the status of collection of assessed contributions for 2021 and prior years.

(Fourth meeting, 29 September 2020)

CD58.R9: COVID-19 Pandemic in the Region of the Americas

THE 58th DIRECTING COUNCIL,

Having reviewed the document *COVID-19 Pandemic in the Region of the Americas* (Document CD58/6);

Recalling resolutions COVID-19 response (Resolution WHA73.1 [2020]), International cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19 (Resolution A/RES/74/274 [2020]), Global solidarity to fight the coronavirus disease 2019 (COVID-19) (Resolution A/RES/74/270 [2020]), Plan of Action for Disaster Risk Reduction 2016-2021 (Resolution CD55.R10 [2016]), Transforming our world: the 2030 Agenda for Sustainable Development (Resolution A/RES/70/1 [2015]), Sendai Framework for Disaster Risk Reduction 2015–2030 (Resolution A/RES/69/283 [2015]), Strategy for Universal Access to Health and Universal Health Coverage (Resolution CD53.R14 [2014]), Plan of Action for the Coordination of Humanitarian Assistance (Resolution CD53.R9 [2014]), and Revision of the International Health Regulations (Resolution WHA58.3 [2005]);

Recognizing that, in each and every single country and territory, the COVID-19 pandemic is, and will be, requiring national leadership and responsibility as well as the whole-of-government and the whole-of-society commitment to sustain consistent and robust response, mitigation, and recovery efforts in the medium and long terms;

Recalling World Health Assembly resolution WHA73.1 on the response to the COVID-19 pandemic, and in particular the call, in the spirit of unity and solidarity, to intensify cooperation and collaboration at all levels in order to contain and control the COVID-19 pandemic and mitigate its impact;

Recognizing the role of extensive immunization against COVID-19 as a global public good for health in preventing, containing, and stopping transmission in order to bring the pandemic to an end once safe, quality, efficacious, effective, accessible, and affordable vaccines are available;

Considering warranted that the commitment and requests expressed in the World Health Assembly's resolution WHA73.1 on COVID-19 response for responding to, mitigating the impact of, and recovering from the COVID-19 pandemic are reemphasized and renewed in the Region of the Americas,

RESOLVES:

1. To urge all Member States, considering their contexts, needs, vulnerabilities, and priorities, to:
 - a) maintain, enhance, expand, and plan for sustained and sustainable, whole-of-government and whole-of-society policies, strategies, and actions to continue responding to the COVID-19 pandemic;
 - b) continue investing, and leveraging advantages and innovation resulting from the response to the COVID-19 pandemic in population- and individual based services throughout the health system, with emphasis on the essential public health functions;

- c) initiate preparatory activities for immunization in anticipation of the availability of a safe, efficacious, and accessible COVID-19 vaccine;
 - d) comply with the provisions of the International Health Regulations (IHR), in particular with those related to the timely sharing of information: *i*) allowing for the comprehensive monitoring of the evolution of the COVID-19 pandemic; *ii*) enabling States Parties to undertake risk management activities accordingly; *iii*) allowing the Pan American Sanitary Bureau (the Bureau) to deploy support in the field;
 - e) conduct and document—with the support of the Bureau as necessary—reviews of the national response to the COVID-19 pandemic;
 - f) take into account the movement of people (e.g., humanitarian and health workers, essential workers, aircraft, and vessel crew members), equipment, and supplies needed for COVID-19 pandemic response operations; as well as of essential goods;
 - g) provide sustainable funding to the Pan American Health Organization so that it can fulfill its mandates while responding to, mitigating the impact of, and recovering from the COVID-19 pandemic, considering the economic impact of the COVID-19 pandemic in developing Member States.
2. To request the Director to:
- a) continue providing evidence-based technical cooperation to Member States, promote innovation and sharing of experiences, to resume and maintain uninterrupted operations and interventions of the health system in all relevant aspects necessary for responding to the COVID-19 pandemic;
 - b) exert transparency, independence, and impartiality, when calling upon States Parties to timely and responsible sharing of truthful information—pursuant to the provisions of the IHR—about the evolution of the COVID-19 pandemic in their territory;
 - c) maintain the regional network for the surveillance of influenza and other respiratory viruses, and expand them through the creation of a Regional Genomic Surveillance Network;
 - d) support Member States through the Bureau’s technical areas, the Revolving Fund for Access to Vaccines (Revolving Fund), and the Regional Revolving Fund for Strategic Public Health Supplies (Strategic Fund) to improve equitable access to, without undermining incentives for innovation, and appropriate use of, affordable, safe, efficacious and quality vaccines, therapeutics, diagnostics, biomedical equipment, and personal protective equipment that can improve health outcomes and reduce the impact of the pandemic;

- e) support Member States in engaging with global initiatives, such as the Access to COVID-19 Tools Accelerator, for vaccines, diagnostics and therapeutics, the Solidarity Call to Action and all other relevant initiatives for the development and access to essential health technologies for COVID-19;
- f) continue to develop actions and tools that promote international cooperation, in the framework of Resolution CD52.R15, *Cooperation for Health Development in the Americas*, to respond to the COVID-19 pandemic in the Region of the Americas;
- g) provide support to Member States, in the framework of the IHR and in coordination with the World Health Organization, through the development and publication of regional guidelines and recommendations on the management of international travelers, for example, the effectiveness of traveler screening tools, among others, in order to allow Member States to undertake the corresponding risk management activities;
- h) inform Member States on a regular basis on advances in the research and development of COVID-19 vaccines, therapeutics and diagnostics, as well as recommendations for use, principles for access and allocation, regulatory requirements, and actions that the Revolving Fund and the Strategic Fund have initiated to ensure access to vaccines and products for COVID-19;
- i) promote, facilitate and consolidate reviews of the response to the COVID-19 pandemic conducted by Member States, as well as carry out and document an equivalent exercise focusing on the response by the Bureau in alignment with Resolution WHA73.1;
- j) maintain and continue to strengthen the capacity of the Bureau at all organizational levels to respond to the COVID-19 pandemic and other emergencies and disasters;
- k) report regularly to the Governing Bodies of the Pan American Health Organization on the progress made and challenges faced in the implementation of this Resolution.

(Fourth meeting, 29 September 2020)

Decisions

CD58(D1): Election of Officers

Pursuant to Rule 16 of the Rules of Procedure of the Directing Council, the Council elected Colombia as President, Grenada and Honduras as Vice Presidents, and Uruguay as Rapporteur of the 58th Directing Council.

(First meeting, 28 September 2020)

CD58(D2): Establishment of a Working Party to Study the Application of Article 6.B of the PAHO Constitution

Pursuant to Rule 31 of the Rules of Procedure of the Directing Council, the Council appointed Aruba, El Salvador, and Trinidad and Tobago as members of the Working Party to Study the Application of Article 6.B of the PAHO Constitution.

(First meeting, 28 September 2020)

CD58(D3): Appointment of the Committee on Credentials

Pursuant to Rule 31 of the Rules of Procedure of the Directing Council, the Council appointed Antigua and Barbuda, Costa Rica, and Paraguay as members of the Committee on Credentials.

(First meeting, 28 September 2020)

CD58(D4): Establishment of the General Committee

In view of the logistical limitations presented by the electronic platform used for the virtual session, the Council decided that all matters related to the dispatch of the business of the Council that would ordinarily have been dealt with by the General Committee would be addressed by the Council itself.

(First meeting, 28 September 2020)

CD58(D5): Adoption of the Agenda

Pursuant to Rule 10 of the Rules of Procedure of the Directing Council, the Council adopted the agenda submitted by the Director (Document CD58/1).

(First meeting, 28 September 2020)

CD58(D6): Programming of the Revenue Surplus

The Directing Council endorsed the allocation of the revenue surplus as proposed in Document CD58/12.

(Second meeting, 28 September 2020)

IN WITNESS WHEREOF, the President of the 58th Directing Council, 72nd Session of the Regional Committee of WHO for the Americas, Delegate of Colombia, and the Secretary ex officio, Director of the Pan American Sanitary Bureau, sign the present Final Report in the Spanish language.

DONE in Washington, D.C., on this twenty-ninth day of September in the year two thousand twenty. The Secretary shall deposit the original texts in the archives of the Pan American Sanitary Bureau. The Final Report will be published on the website of the Pan American Health Organization once approved by the President.

Fernando Ruiz Gómez
President of the
58th Directing Council,
72nd Session of the Regional Committee
of WHO for the Americas
Delegate of Colombia

Carissa Etienne
Secretary ex officio of the
58th Directing Council,
72nd Session of the Regional Committee
of WHO for the Americas
Director of the
Pan American Sanitary Bureau

AGENDA

1. OPENING OF THE SESSION

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- 2.1 Appointment of the Committee on Credentials
- 2.2 Election of Officers
- 2.3 Establishment of a Working Party to Study the Application of Article 6.B of the PAHO Constitution
- 2.4 Establishment of the General Committee
- 2.5 Adoption of the Agenda

3. CONSTITUTIONAL MATTERS

- 3.1 Annual Report of the President of the Executive Committee
- 3.2 Annual Report of the Director of the Pan American Sanitary Bureau
- 3.3 Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Belize, Canada, and Peru

4. PROGRAM POLICY MATTERS

- 4.1 Report of the End-of-biennium Assessment of the PAHO Program and Budget 2018-2019/Final Report on the Implementation of the PAHO Strategic Plan 2014-2019
 - 4.2 COVID-19 Pandemic in the Region of the Americas
 - 4.3 PAHO Governance Reform
 - 4.4 Current Financial Situation and Adjustments to the Pan American Health Organization Strategic Priorities
-

5. ADMINISTRATIVE AND FINANCIAL MATTERS

- 5.1 Report on the Collection of Assessed Contributions
- 5.2 Financial Report of the Director and Report of the External Auditor for 2019
- 5.3 Status and Authorized Level of the Working Capital Fund
- 5.4 Programming of the Budget Surplus
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- 5.6 Amendments to the Financial Regulations and Financial Rules of PAHO
- 5.7 Update on the Appointment of the External Auditor of PAHO for 2022-2023
- 5.8 Review of the Charge Assessed on the Procurement of Public Health Supplies for Member States

6. SELECTION OF MEMBER STATES TO BOARDS AND COMMITTEES

- 6.1 Election of Two Members to the Advisory Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME)

7. MATTERS FOR INFORMATION*

- 7.1 Implementation of the International Health Regulations

8. OTHER MATTERS

9. CLOSURE OF THE SESSION

Annex

* Due to the COVID-19 pandemic and according to Resolution CE166.R7, Final and Progress Reports listed in the Annex to this agenda were published on the webpage of the 58th Directing Council for information purposes only.

Annex

**Final Reports and Progress Reports on Policies, Strategies and Plans of Action
Due for Reporting to the Directing Council in 2020**

Matters for Information	Document Number
Plan of Action for the Prevention of Blindness and Visual Impairment: Final Report (Resolution CD53.R8 [2014])	CD58/INF/2
Plan of Action on Health in All Policies: Final Report (Resolution CD53.R2 [2014])	CD58/INF/3
Strategy and Plan of Action on Dementias in Older Persons: Final Report (Resolution CD54.R11 [2015])	CD58/INF/4
Plan of Action for the Prevention of Obesity in Children and Adolescents: Final Report (Resolution CD53.R13 [2014])	CD58/INF/5
Plan of Action for the Prevention and Control of Noncommunicable Diseases: Final Report (Resolution CD52.R9 [2013]) (Resolution CD48.R9 [2008])	CD58/INF/6
Plan of Action on Disabilities and Rehabilitation: Final Report (Resolution CD53.R12 [2014])	CD58/INF/7
Plan of Action for Universal Access to Safe Blood: Final Report (Resolution CD53.R6 [2014])	CD58/INF/8
Plan of Action for the Prevention and Control of Viral Hepatitis: Final Report (Resolution CD54.R7 [2015])	CD58/INF/9
Plan of Action for the Prevention and Control of Tuberculosis: Final Report (Resolution CD54.R10 [2015])	CD58/INF/10
Strategy for Arboviral Disease Prevention and Control: Final Report (Resolution CD55.R6 [2016])	CD58/INF/11

Matters for Information	Document Number
Plan of Action for the Coordination of Humanitarian Assistance: Final Report (<i>Resolution CD53.R9 [2014]</i>)	CD58/INF/12
Health, Drinking Water, and Sanitation in Sustainable Human Development: Final Report (<i>Resolution CD43.R15 [2001]</i>)	CD58/INF/13
Progress Reports on Technical Matters:	
A. Plan of Action on Workers' Health: Midterm Review (<i>Resolution CD54.R6 [2015]</i>)	CD58/INF/14(A)
B. Strategy and Plan of Action to Strengthen Tobacco Control in the Region of the Americas 2018-2022: Midterm Review (<i>Resolution CSP29.R12 [2017]</i>) (<i>Resolution CD50.R6 [2010]</i>)	CD58/INF/14(B)
C. Plan of Action for Disaster Risk Reduction 2016-2021: Progress Report (<i>Resolution CD55.R10 [2016]</i>)	CD58/INF/14(C)
D. PAHO Gender Equality Policy: Progress Report (<i>Resolution CD46.R16 [2005]</i>) (<i>Resolution CD49.R12 [2009]</i>)	CD58/INF/14(D)
E. Strengthening National Regulatory Authorities for Medicines and Biologicals: Progress Report (<i>Resolution CD50.R9 [2010]</i>)	CD58/INF/14(E)
F. Resilient Health Systems: Progress Report (<i>Resolution CD55.R8 [2016]</i>)	CD58/INF/14(F)
G. Plan of Action for the Strengthening of Vital Statistics 2017-2022: Midterm Review (<i>Resolution CSP29.R4 [2017]</i>)	CD58/INF/14(G)

LIST OF DOCUMENTS

Official Documents

OD360 Financial Report of the Director and Report of the External Auditor for 2019

Working Documents

CD58/1 Agenda

CD58/WP/1 Program of Meetings

CD58/2 Annual Report of the President of the Executive Committee

CD58/3, Rev. 1 Annual Report of the Director of the Pan American Sanitary Bureau

CD58/4 Election of Three Member States to the Executive Committee on the Expiration of the Periods of Belize, Canada, and Peru

CD58/5 and Add. I Report of the End-of-biennium Assessment of the PAHO Program and Budget 2018-2019/Final Report on the Implementation of the PAHO Strategic Plan 2014-2019

CD58/6 COVID-19 Pandemic in the Region of the Americas

CD58/7 and Add. I PAHO Governance Reform

CD58/8 Current Financial Situation and Adjustments to the Pan American Health Organization Strategic Priorities

CD58/9, Add. I and Add. II Report on the Collection of Assessed Contributions

CD58/10 Status and Authorized Level of the Working Capital Fund

CD58/11 Programming of the Budget Surplus

CD58/12 Programming of the Revenue Surplus

CD58/13 and Add. I Amendments to the Financial Regulations and Financial Rules of PAHO

CD58/14 Update on the Appointment of the External Auditor of PAHO for 2022-2023

Working Documents *(cont.)*

CD58/15 Review of the Charge Assessed on the Procurement of Public Health Supplies for Member States

CD58/16 Election of Two Members to the Advisory Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME)

Information Documents

CD58/INF/1 Implementation of the International Health Regulations

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President / Presidente:	Dr. Fernando Ruíz Gómez (Colombia)
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Vice-President / Vicepresidente:	Lcda. Alba Consuelo Flores Ferrufino (Honduras)
Rapporteur / Relator:	Dr. Miguel Asqueta Sóñora (Uruguay)

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MEMBER STATES/ESTADOS MIEMBROS (cont.)

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MEMBER STATES/ESTADOS MIEMBROS (cont.)

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