

**EIGHTH SESSION OF THE SUBCOMMITTEE  
ON PROGRAM, BUDGET, AND ADMINISTRATION  
OF THE EXECUTIVE COMMITTEE**

*Washington, D.C., USA, 19-21 March 2014*

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*Provisional Agenda Item 4.5*

SPBA8/9, Rev. 1  
14 March 2014  
Original: English

**STATUS OF PROJECTS FUNDED FROM  
THE PAHO HOLDING ACCOUNT**

1. The 48th Directing Council (2008), in accordance with Resolution CD48.R1 (1), approved the use of the Holding Account to fund priority projects as listed in Document CD48/22 (2). The resolution calls for the Pan American Sanitary Bureau (PASB) to present to the Executive Committee, through the Subcommittee on Program, Budget, and Administration (SPBA), periodic status reports on the projects funded from the Holding Account. This document represents an update as of 31 December 2013.
2. Under Resolution CD48.R1, seven of the original 14 projects proposed (1.A, 1.B, 4.A, 4.C, 4.D, 4.E, and 4.F) were approved in their entirety; six (2.A, 2.C, 3.A, 3.B, 3.C, and 4.B) were approved with respect to their first phase; and one (2.B) was not approved. Since then, the budgets of six of the 13 approved projects have been revised based on updated information: three project budgets were reduced, and three were increased. During the 148th Session of the Executive Committee in June 2011, a new project 3.D—the Modernization of the PASB Management Information System, Phase 2—was approved with the unallocated balance in the Holding Account of US\$ 9.135 million, in accord with Resolution CD50.R10 (2010) (3). The total amount of \$25,290,000 originally available in the Holding Account has now been fully allocated.<sup>1</sup>
3. Table 1 summarizes information on all 15 projects, briefly describing each one. The table also shows the total estimated budget for each project, the estimated portion to be funded from the Holding Account (to date), and an estimate of funding from other sources.
4. Table 2 summarizes the budget implementation as of 31 December 2013 for all projects, showing that a combined \$18.717 million has been disbursed against the \$25.290 million of authorized funding. The unspent balance of \$6.573 million will be available throughout the 2014-2015 biennium and beyond. The Bureau will continue to provide updated reports until all projects have been fully implemented.

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<sup>1</sup> Unless otherwise indicated, all monetary figures in this report are expressed in U.S. dollars.

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5. The updated project profiles of the 10 active projects (1.A, 1.B, 2.A, 2.C, 3.B, 3.D, 4.A, 4.B, 4.D, 4.F) are included in the Annex; they detail the purpose of each project and provide an update on progress and planned activities.

**Action by the Subcommittee on Program, Budget, and Administration**

6. The Subcommittee is invited to examine this document, to consider authorizing the transfer of unused balances of completed projects 1.A and 4.A to active project 3.D, and to provide recommendations as deemed necessary.

**TABLE 1**  
**Summary of Projects Funded from the Holding Account**  
**(in US\$)**

No.	Title	Description	Revised Budget	Estimated from Holding Account	Estimated from Other Sources
1.A	<b>Emergency Operations Center and Knowledge Center (EOC/KC)</b>	A regional EOC/KC is a central hub that conducts the corporate functions of emergency event assessment and management, disaster response coordination, and information and knowledge management. It also serves as a forum for analysis and information exchange to facilitate decision-making in support of efficient and timely response to all events that may constitute a public health event of international concern (PHEIC), as defined under the International Health Regulations (2005). For further details, please refer to Project Profile 1.A in the Annex.	<b>3,278,000</b>	2,900,000	378,000
1.B	<b>Establishment of National Focal Points for International Health Regulations</b>	The national liaison centers for the International Health Regulations in the countries should receive support to boost their capacity to instantly generate information and manage knowledge; assess health risks; respond to situations that could constitute public health emergencies, such as natural disasters, communicable disease outbreaks, or chemical and radio-nuclear incidents; and meet the requirements set forth in the International Health Regulations (2005). For further details, please refer to Project Profile 1.B in the Annex.	<b>3,000,000</b>	1,500,000	1,500,000
2.A	<b>Strengthening PAHO's Public Health Information Systems</b>	A new health information systems strategy should be put in place to rectify the fragmentation and lack of integration among systems, the duplication of systems that overwhelms countries with multiple requests for information, and the insufficient dissemination of available information. For further details, please refer to Project Profile 2.A in the Annex.	<b>5,000,000</b>	2,225,000	2,775,000

**TABLE 1**  
**Summary of Projects Funded from the Holding Account**  
**(in US\$)**

No.	Title	Description	Revised Budget	Estimated from Holding Account	Estimated from Other Sources
2.B	<b>Adoption of Networking Strategies to Transform the Delivery of Technical Cooperation</b>	Project proposal not approved by Member States.	N/A	N/A	N/A
2.C	<b>Strengthening Communications through Improved PWR Connectivity</b>	A PAHO Private Network will support the communications needs of the Organization’s modern corporate management systems by providing the required connectivity through added communications capacity, bandwidth, security, and reliability. This network will enable and support social networking, knowledge-sharing, electronic meetings, and videoconferencing, and will provide connectivity to extend systems in health institutions. The network will also provide a foundation for the future direct involvement of Member States in the activities of the Bureau. For further details, please see Project Profile 2.C in the Annex.	<b>2,100,000</b>	2,000,000	100,000
3.A	<b>Modernization of the PASB Management Information System – Phase 1</b>	PASB should fully explore business processes and how they can be improved in order to align with the World Health Organization (WHO), support a robust results-based management framework, and improve administrative efficiencies, reflecting the same high level of integration and interoperability that WHO expects to achieve through its implementation of the Global Management System. PASB will evaluate three alternatives for modernizing its management information system (PMIS) and formulate a recommendation for consideration by the Governing Bodies. For further details, please refer to Project Profile 3.A in Document CD48/22 (2008).	<b>1,000,000</b>	1,000,000	0

**TABLE 1**  
**Summary of Projects Funded from the Holding Account**  
**(in US\$)**

No.	Title	Description	Revised Budget	Estimated from Holding Account	Estimated from Other Sources
3.B	<b>Modernization of the Service Model for Delivery of IT and KM Services</b>	This initiative seeks to reduce the maintenance and management needs of PAHO's information technology infrastructure in all offices, decrease current security vulnerabilities, and provide updated software supporting all four PAHO official languages, thus reducing the management of desktops in PAHO/WHO Representative Offices and simplifying local office support. For further details, please refer to Project Profile 3.B in the Annex.	<b>2,230,000</b>	1,500,000	730,000
3.C	<b>Strengthening of the Organization's Capacity to be IPSAS-Compliant by 2010</b>	The United Nations System agreed to replace the United Nations System Accounting Standards (UNSAS) with International Public Sector Accounting Standards (IPSAS) by 2010. PAHO's Governing Bodies approved the adoption of IPSAS by 2010. In order to meet that commitment, the Organization must align its Financial Regulations and Rules, processes, and systems with IPSAS. Furthermore, significant training and oversight will be required to ensure that new policies are understood and implemented correctly. For further details, please refer to Project Profile 3.C in Document CD48/22 (2008).	<b>500,000</b>	300,000	200,000
3.D	<b>Modernization of the PASB Management Information System – Phase 2 (implementation)</b>	The PMIS Modernization Project will enable the Bureau to strengthen collaboration among all stakeholders and will lead to improved results-based management and organizational decision-making. The modernization project will replace most of the Bureau's aging administrative information systems and significantly improve its business processes and administrative operations, thus reducing overall operational costs. For further details, please refer to Project Profile 3.D in the Annex.	<b>20,300,000</b>	9,135,000	11,165,000

**TABLE 1**  
**Summary of Projects Funded from the Holding Account**  
**(in US\$)**

No.	Title	Description	Revised Budget	Estimated from Holding Account	Estimated from Other Sources
4.A	<b>Improvements to Facilities: MOSS Upgrades and Security Measures</b>	PAHO/WHO Representative Offices need one-time assistance to complete Minimum Operational Security Standards (MOSS) upgrades. For further details, please refer to Project Profile 4.A in the Annex.	<b>300,000</b>	300,000	0
4.B	<b>Improvements to Facilities: Energy-Saving Measures</b>	Many components of the Headquarters building and conference center are the original ones installed in 1965 and need to be replaced. Components to be replaced include the induction heating/cooling system and electrical cabinets on the 2nd and 10th floors, the windows of the main building and conference center, and the conference center roof. For further details, please refer to Project Profile 4.B in the Annex.	<b>2,500,000</b>	2,500,000	0
4.C	<b>Improvements to Facilities: Plaza Drainage System Repairs</b>	There are leaks in the plaza drainage system at Headquarters, and as a matter of regular maintenance, the entire system needs repair. For further details, please refer to Project Profile 4.C in Document SPBA7/10 (20013).	<b>375,000</b>	375,000	0
4.D	<b>Improvements to Facilities: Security and Sanitary Measures</b>	Security upgrades are needed in the Headquarters lobby and 2nd floor, along with sanitary improvements in the building's restrooms. For further details, please refer to Project Profile 4.D in the Annex.	<b>330,000</b>	330,000	0
4.E	<b>Improvements to Facilities: Headquarters Office Tower Roof Repairs</b>	The scheduled replacement of the roof over the main Headquarters office tower is overdue. There are increasing leaks during rainstorms, further damaging the building. For further details, please refer to Project Profile 4.E in Document CD48/22 (2008).	<b>347,000</b>	250,000	97,000

**TABLE 1**  
**Summary of Projects Funded from the Holding Account**  
**(in US\$)**

No.	Title	Description	Revised Budget	Estimated from Holding Account	Estimated from Other Sources
4.F	<b>Improvements to Facilities: Refurbishment of Conference Rooms and Furniture</b>	The Organization's main physical assets are the Headquarters office tower, the conference wing, and the adjacent rented office annexes. These facilities require ongoing maintenance to ensure that they remain useful in support of the Bureau's work of providing technical cooperation to Member States, and to meet technological and ergonomic requirements and work safety standards. For further details, please refer to Project Profile 4.F in the Annex.	<b>1,075,000</b>	975,000	100,000
		<b>Total</b>	<b>42,335,000</b>	<b>25,290,000</b>	<b>17,045,000</b>

**TABLE 2**  
**Holding Account Implementation Summary,**  
**as of 31 December 2013**  
**(in US\$)**

Project Ref.	Project	Total Project Budget (Ref. only)	Authorized from Holding Account	Implemented	Balance in Holding Account	Comments
1.A	Emergency Operations Center and Knowledge Center (EOC/KC)	3,278,000	2,900,000	2,808,700	91,300	Completed
1.B	Establishment of National Focal Points for International Health Regulations	3,000,000	1,500,000	1,425,537	74,463	Completion of all focal points expected June 2014
2.A	Strengthening PAHO's Public Health Information Systems	5,000,000	2,225,000	1,021,173	1,203,827	Phase 2 to continue in 2014
2.C	Strengthening Communications through Improved PWR Connectivity	2,100,000	2,000,000	1,603,583	396,417	Completion expected in the 2014-2015 biennium
3.A	Modernization of the PASB Management Information System – Phase 1	1,000,000	919,751	919,751	0	Completed
3.B	Modernization of the Service Model for Delivery of IT and KM services	2,230,000	1,500,000	1,340,125	159,875	Completion expected in the 2014-2015 biennium
3.C	Strengthening of the Organization's Capacity to be IPSAS-Compliant by 2010	500,000	286,912	286,912	0	Completed
3.D	Modernization of the PASB Management Information System – Phase 2 (implementation)	20,300,000	9,228,337	7,841,049	1,387,288	Completion expected in the 2014-2015 biennium
4.A	Improvements to Facilities: MOSS Upgrades and Security Measures	300,000	300,000	290,787	9,213	Completed
4.B	Improvements to Facilities: Energy-Saving Measures	2,500,000	2,500,000	20,250	2,479,750	Completion expected in 2014
4.C	Improvements to Facilities: Plaza Drainage System Repairs	375,000	375,000	375,000	0	Completed



**TABLE 2**  
**Holding Account Implementation Summary,**  
**as of 31 December 2013**  
**(in US\$)**

Project Ref.	Project	Total Project Budget (Ref. only)	Authorized from Holding Account	Implemented	Balance in Holding Account	Comments
4.D	Improvements to Facilities: Security and Sanitary Measures	330,000	330,000	68,472	261,528	Completion expected in 2014
4.E	Improvements to Facilities: Headquarters Office Tower Roof Repairs	347,000	250,000	250,000	0	Completed
4.F	Improvements to Facilities: Refurbishment of Conference Rooms and Furniture	1,075,000	975,000	465,440	509,560	Period of activities to be determined upon completion of building condition assessment
<b>Total</b>		<b>42,335,000</b>	<b>25,290,000</b>	<b>18,716,779</b>	<b>6,573,221</b>	

### References

1. Pan American Health Organization. Use of Program Budget Income Exceeding the Authorized Effective Working Regular Budget 2006-2007 [Internet]. 48th Directing Council of PAHO, 60th Session of the WHO Regional Committee for the Americas; 2008 Sept 29-Oct 3; Washington (DC), United States. Washington (DC): PAHO; 2008 (Resolution CD48.R1) [cited 2012 January 17]. Available from: <http://www.paho.org/english/gov/cd/CD48.r1-e.pdf>.
2. Pan American Health Organization. Use of Program Budget Income Exceeding the Authorized Effective Working Regular Budget 2006-2007 [Internet]. 48th Directing Council of PAHO, 60th Session of the WHO Regional Committee for the Americas; 2008 Sept 29-Oct 3; Washington (DC), United States. Washington (DC): PAHO; 2008 (Document CD48/22) [cited 2012 January 17]. Available from: <http://www.paho.org/english/gov/cd/cd48-22-e.pdf>.
3. Pan American Health Organization. Modernization of the PASB Management Information System [Internet]. 50th Directing Council of PAHO, 62nd Session of the WHO Regional Committee for the Americas; 2010 Sept 27-Oct 1; Washington (DC), United States. Washington (DC): PAHO; 2010 (resolution CD50.R10) [cited 2012 January 17]. Available from: [http://new.paho.org/hq/index.php?option=com\\_download&task=doc\\_download&gid=8974&Itemid=](http://new.paho.org/hq/index.php?option=com_download&task=doc_download&gid=8974&Itemid=).

Annex

**Annex**

**Project Profile 1.A**

<b>1. Project title:</b> Emergency Operations Center and Knowledge Center (EOC/KC)
<b>2. Coordinating entity:</b> Office of the Director of Administration (AM) <b>Participating entities:</b> GSO, PED, CHA, KMC, ITS*
<b>3. Beneficiaries:</b> The entire Organization (Member States, PAHO/WHO Representative [PWR] Offices, and technical areas at Headquarters).
<b>4. Total cost (US\$):</b> \$3,060,000
<b>5. Duration:</b> 30 months.
<b>6. Comments:</b> The circular design of the original structure and the limited space in the garage levels presented considerable difficulties in the execution of the project. The architects were challenged in developing a floor plan that would provide the desired number of conference rooms and other working areas and also accommodate the mechanical systems (heating, air conditioning, and lighting) in the ceilings and emergency generator in the sub-basement. The ground floor facility was delivered to users in early September 2012, and the Center's emergency generator was commissioned 2013 after an upgraded natural gas supply line was installed. This project was completed in 2013.

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\* A list of acronyms can be found at the end of this document.

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**Project Profile 1.B**

<p><b>1. Project title:</b> Establishment of National Focal Points for International Health Regulations (IHR)</p>						
<p><b>2. Coordinating entity:</b> Department of Communicable Diseases and Health Analysis (CHA)  <b>Participating entities:</b> CHA, PED, GSO, selected PWR Offices</p>						
<p><b>3. Beneficiaries:</b> The entire Organization (Member States, PWR Offices, and technical areas at Headquarters).</p>						
<p><b>4. Total estimated cost (US\$):</b> \$3,000,000</p> <p><i>Stage 1:</i></p> <ul style="list-style-type: none"> <li>Ten Member States (Bolivia, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Nicaragua, and Suriname), and CAREC, which is supporting its member countries by coordinating response efforts, sent proposals. All proposals were reviewed by CHA (formerly HSD), with comments from PED, and were approved in early 2010. Funds were released to the countries in late April 2010. Additionally, Belize sent its proposal in early 2011 and funds were released in late August 2011; Haiti and Jamaica sent their proposals and funds were released in early 2012. After the submission of its proposal in 2012, funds were released to Guyana in July 2012.</li> </ul> <p><i>Stage 2:</i></p> <ul style="list-style-type: none"> <li>It was expected that all countries would have the technical and communication tools in place to support the National IHR Focal Points functions by June 2012, the deadline for the establishment of national core capacities. However, the fact that 29 of the 35 States parties in the Region requested and obtained an extension until June 2014 to establish them, highlights challenges experienced by countries in the implementation of the IHR and partially explains the inability to execute funds according to the intended deadline.</li> </ul> <table> <tr> <td>Contributions from the PAHO Holding Account:</td> <td>\$1,500,000</td> </tr> <tr> <td>Contributions from financial partners:</td> <td>\$1,500,000 (cost-sharing funds)</td> </tr> <tr> <td>Contributions from other sources:</td> <td>0</td> </tr> </table>	Contributions from the PAHO Holding Account:	\$1,500,000	Contributions from financial partners:	\$1,500,000 (cost-sharing funds)	Contributions from other sources:	0
Contributions from the PAHO Holding Account:	\$1,500,000					
Contributions from financial partners:	\$1,500,000 (cost-sharing funds)					
Contributions from other sources:	0					
<p><b>5. Estimated duration:</b> 36 months.</p>						

### Project Profile 1.B

**6. Comments:** From 1 January to 31 December 2013, the implementation was completed by three of the 12 organizational entities for which plans had been approved in 2010-2011—Belize, Cuba, and Suriname—as well as by two of the three organizational entities that had submitted their proposals and were allocated funds in 2012—Haiti and Jamaica. Funds were devoted to the implementation of activities included in the IHR National Extension Action Plans submitted by national authorities with their request for a two-year extension of the 15 June 2012 deadline for establishing core capacities detailed in Annex 1 of the IHR (see Document [CD52/10](#), Implementation of the International Health Regulations). The overall execution for the above mentioned entities correspond to 95%.

After the submission of its proposal in 2012, funds were released to Guyana in July 2012 and the sub-optimal financial execution of 42% is of significant concern, especially considering the fast approaching deadline for the implementation of the IHR National Extension Action Plans (15 June 2014) and the intense efforts that are needed to ensure that funds are rapidly channeled to support the implementation of priority activities. PAHO/CHA flagged this to the PWR Office in Guyana, also indicating that, due to the lack of progress in the implementation, it would be wise to consider reprogramming the funds to support multi-country activities focusing on critical technical areas such as preparedness for chemical and radiation related events.

**Project Profile 2.A**

<p><b>1. Project title:</b> Strengthening PAHO's Public Health Information Systems</p>				
<p><b>2. Coordinating entity:</b> Communicable Diseases and Health Analysis (CHA)</p> <p><b>Participating entities:</b> CHA, KMC, ITS</p>				
<p><b>3. Beneficiaries:</b> Beneficiaries include the countries of the Americas, especially those with poor health information, and all PAHO areas that will benefit from better organization and availability of data. Civil society and the general public will also benefit by being able to access well-organized health information and analyses from all countries of the Region.</p>				
<p><b>4. Total estimated cost (US\$):</b> \$5,000,000</p> <table> <tr> <td>Estimated contribution from PAHO Holding Account:</td> <td>\$2,225,000</td> </tr> <tr> <td>Estimated contribution from other sources:</td> <td>\$2,775,000</td> </tr> </table> <p>From a revised total budget of \$5 million originally planned for Project 2A, during the Phase 1, a total of \$500,000 was expended (from mid-2009 to the end of 2010) and a total of \$1,725,000 has been planned for Phase 2.</p> <p>A total of \$500,000 was allocated in April 2011 to start activities planned for Phase 2 of the project and an additional \$400,000 was allocated in August 2012.</p> <p><b>Amount assigned for 2012-2013:</b> \$776,623.00. From the previous disbursement (April 2011), \$376,623 were not executed (or carried out). The amount of \$400,000.00 received in August 2012 should be added, which gives a total of \$776,623 to be carried out between August 2012 and 31 December 2013.</p> <p>Currently there is a balance of \$161,452.50 planned for the first semester of 2014. The remaining funds will be requested to be able to finalize the review process, evaluation, updating and harmonization with the Global Health Observatory of the World Health Organization, as well as the PAHO Health Information Platform (PHIP).</p>	Estimated contribution from PAHO Holding Account:	\$2,225,000	Estimated contribution from other sources:	\$2,775,000
Estimated contribution from PAHO Holding Account:	\$2,225,000			
Estimated contribution from other sources:	\$2,775,000			
<p><b>5. Estimated duration:</b> 48 months.</p>				
<p><b>6. Comments:</b></p> <p><b>Outlook for 2014:</b> During the first semester of 2014, CHA/HA will work on the revision, evaluation and planning of activities and tasks to adjust Phase 2 of the PAHO Health Information Platform (PHIP) according to the new instructions of WHO. It is expected that this exercise will be finished by the end of 2015. This will include, in addition to other activities of the Regional Core Health Data Initiative and Country Profiles, the creation of new core basic indicators.</p> <p>A P2 Post of Limited Duration was established for this project and is currently under selection. The selected candidate will contribute to and provide project continuity, review, and updating.</p> <p>To date, HA staff does not have access to the technology of the Regional Health Observatory (RHO) or the PHIP. This situation needs to be regularized, as it has resulted in delays in the implementation and continuity of the project.</p>				

## Project Profile 2.A

The section of Phase 2 which included the consolidation, strengthening, and scale-up of the PHIP as the corporate authoritative information resource (meaning it hosts health data and information from most of the technical units and programs across the Organization) has not been completed yet.

**Summary of progress in 2013:** The RHO was partially updated in 2013 with annual data collected through the Regional Initiative of Core Health Indicators and Country Profiles. Data sets were available, catalogued and published on the RHO portal. Joint collaboration between the CHA/HA team and specific technical programs/projects resulted in the publication of some health analysis data on the RHO portal (<http://www.paho.org.rho>). A data analysis workshop was conducted in July 2013 for PAHO staff. As a result of the Organization's restructuring process, in August 2013, the Specialist responsible for this project was transferred to another technical unit.

**Summary of progress in 2012:** The PAHO Health-Information Platform (PHIP) was partially operational. The PHIP IT infrastructure was configured in both staging and production environments following IT best practices and standards. All programmed maintenance tasks and fine-tuning to IT infrastructure and software were carried out. The PHIP health intelligence component is available at <http://phip.paho.org>.

The portal of the Regional Health Observatory worked with high availability in this period, but with some limitations. All information products published on the RHO portal were being served by PHIP through standards and interoperability mechanisms. Until September 2012, CHA/HA and technical programs and projects produced and published health analytical themes on the RHO portal. Due to the annual update of the Regional Initiative of Core Health Data and Country Profiles, available data sets were catalogued and published on the RHO portal.

Phase 2 was not finished by the end of 2012 as originally planned. However, in practical terms, the acquired technology (hardware and software) and the data were operational. In September 2012, the Health Information and Analysis (HA) Coordinator was transferred. No update was prepared in 2012 given the CHA/HA staff changes and the lack of access to the technology of the RHO and the PHIP. The most recent update of the RHO mortality database had been conducted in September 2011.

**Summary of progress from 2009-2011:** Please refer to Document [SPBA4/10](#), Use of Holding Account Funds; Document [SPBA5/7](#), Status of Projects Funded from PAHO Holding Account; and Document [CE152/20](#), Status of Projects Funded from PAHO Holding Account.

**Project Profile 2.C**

<b>1. Project title:</b> Strengthening Communications through Improved PWR Connectivity	
<b>2. Coordinating entity:</b> Office of the Director of Administration (AM) <b>Participating entities:</b> ITS, KMC, BIREME	
<b>3. Beneficiaries:</b> Beneficiaries include all staff members at PAHO Headquarters, PAHO/WHO Representative Offices, and Pan American Centers. Secondary beneficiaries include Member States and other stakeholders, given that this investment will lead to an increase in collaboration with partners.	
<b>4. Total estimated cost (US\$):</b> \$2,100,000	
Contractor to support implementation of the telephony component:	\$200,000
Project manager to implement the PAHO Network:	\$60,000
Integration of in-country phone systems with HQ:	\$180,000
Penalties to terminate in-country ISP contracts (maximum amount—may be less):	\$120,000
Quality of service devices (leveraging WHO standards):	\$450,000
One-time transition costs to support interoffice long-distance costs:	\$300,000
Backup satellite facility to ensure continuity of connectivity in a disaster:	\$615,000
Additional phone system for Venezuela:	\$35,000
Contingencies:	<u>\$40,000</u>
Contributions from the PAHO Holding Account:	<b>\$2,000,000</b>
Contributions from other sources:	\$100,000
Estimated annual contributions from PWRs for local ISP and inter-country long distance costs:	\$1,000,000
<b>5. Estimated duration:</b> 24 months.	
The initial estimated duration of 24 months has been extended due to the following:	
<ul style="list-style-type: none"> <li>• Phone system integration in several countries still pending.</li> <li>• Installation not yet completed for the quality of service devices that leverage WHO standards.</li> </ul>	

**Project Profile 2.C**

**6. Comments:** During 2013, \$566,417 was allotted, \$170,000 implemented, leaving a balance of \$396,417.

- a) Phase I of the PAHO Private Network (PPN) installation using the provider Telefónica has been completed in 21 PWR Offices and Pan American Centers.
- b) PAHO ITS continues to monitor the networking and telephony in these locations to ensure optimum connectivity and operations until the contracts for Telefónica are completed mid-2015.

Subsequent phases will be based on the requirements for a cloud based PMIS and email architecture, as well as a new funding modality. The collaboration within PAHO and with its partners requires this level of connectivity and investment.



**Project Profile 3.B**

<b>1. Project title:</b> Modernization of the Service Model for Delivery of IT and KM Services	
<b>2. Coordinating entity:</b> Information and Technology Services (ITS)	
<b>Participating entities:</b> ITS, KMC, PWR Offices, and Pan American Centers	
<b>3. Beneficiaries:</b> Beneficiaries include all PAHO staff members at Headquarters, PWR Offices, and Pan American Centers. Secondary beneficiaries include Member States and other stakeholders, given that the knowledge management component will improve the dissemination of knowledge and enhance collaboration with partners.	
<b>4. Total estimated cost (US\$):</b> \$2,230,000	
Development of next generation desktop, collaboration, and managed systems, including implementation to a pilot group:	\$400,000
Deployment of next generation desktop, collaboration and managed systems environment into all PAHO offices:	\$300,000
Learning conference for systems administrators to support in-country implementation:	\$150,000
Funds to supplement current KMC and ITS work on Intranet 2.0:	\$300,000
Acquisition and deployment of training materials for end-users:	\$100,000
Strengthened identity management to support PMIS and service management:	<u>\$250,000</u>
Contributions from the PAHO Holding Account:	<b>\$1,500,000</b>
Contributions from financial partners:	0
Contributions from other sources—funds from the Master Capital Investment Fund (MCIF):	\$730,000
<b>5. Estimated Duration:</b> 48 months.	
<b>6. Comments:</b> During 2013, \$427,058 was allotted, \$267,183 implemented, leaving a balance of \$159,875. Status to date:	
a) The domain consolidation and Microsoft Exchange projects have been completed.	
b) Desktop software refresh based on Windows 7 and Office 2010 completion date scheduled for April 2014.	
c) A Learning Conference for Systems Administrator Conference was held in 2012 with the end result of increased consensus building across all offices for corporate solutions that meet everyone's requirements.	
d) Changes in the Intranet 2.0 by the KMC team during 2012 that position the PAHO Intranet as a central communications portal and an essential collaboration tool.	
The integrated PAHO Service Request System (SRS) for KM and IT service functions continues to be improved, with enhanced reporting capabilities and knowledgebase development currently underway.	

**Project Profile 3.D**

<p><b>1. Project title:</b> Modernization of the PASB Management Information System – Phase 2</p>
<p><b>2. Coordinating entity:</b> AM</p> <p><b>Participating entities:</b> PBU, AM, FRM, HRM, PRO, ITS, HSS, KMC, PWR Offices in Argentina, Brazil, Guatemala and Panama.</p>
<p><b>3. Beneficiaries:</b> All internal and external stakeholders.</p>
<p><b>4. Total estimated cost (US\$):</b> \$20,300,000</p> <p>The 50th Directing Council authorized up to \$10 million to be used from the Holding Account for this project. PBU has identified \$9,215,249 to be used from the Holding Account and the remaining balance from the IPSAS Surplus and Post Occupancy Charge (POC) (2010-2011).</p>
<p><b>5. Estimated duration:</b> This project will conclude in the 2014-2015 biennium. The Go Live date for the last portion of the project is planned for 1 January 2016. An extended period of intensive maintenance and support will follow for stabilization after go live.</p>
<p><b>6. Comments:</b></p> <p>Updated status follows:</p> <p>a) Following a competitive selection process Workday was selected as the enterprise resource planning (ERP) solution for PAHO, and a contract was signed on 30 September 2013. Workday is offered only as a Software as a Service (SaaS) solution.</p> <p>b) A contract with Tidemark was signed on 30 October 2013 as the Planning and Budgeting solution for PAHO. Tidemark fulfills PAHO’s requirements, is also a SaaS solution, and has pre-built integration with Workday.</p> <p>c) Between October and December 2013, PAHO finalized the Scope of Work of the System Integrators (Collaborative Solutions). The contract with the System Integrators was signed on 17 December 2013.</p> <p>d) Between October and December 2013 PAHO also engaged in a competitive Request for Proposal for Change Management Services. The winner of the request for proposal (Cutter Consortium) signed a contract with PAHO on 19 December 2013.</p> <p>e) Following a competitive hiring process and a request for proposal for Project Management services, PAHO finalized the external project manager contract in early January 2014, and the start date is 1 February 2014.</p> <p>f) Effective 27 January 2014, a new internal project lead was appointed. With that change, the PMIS Steering Committee also approved a modification to the project governance structure, for which the internal project lead, the external project manager, the system integrators team and the change management team report directly to the Director of Administration.</p> <p>g) January 2014 represents the beginning of the implementation of the project. The implementation phase comprises of the roll-out of the HR System and Payroll, which will take place at the end of 2014, and a second roll-out of the finance portion of the system, which will start mid-2014 and be completed by the end of 2015. During the in-depth discussions on the PASB’s</p>

**Project Profile 3.D**

requirements for financial transactions and reporting (including the Revolving Fund for Immunization, the Strategic Fund, the international voluntary contributions, and the national voluntary contributions), the Systems Integrator recommended January 2016 for implementation of the finance phase. The PASB staff who reviewed the recommendation with the Systems Integrator accepted the recommendation due to the complexity of the PASB's finance systems and due to the alignment which would be provided with the PASB's biennial budgetary process.

h) A PMIS implementation team was established with 100% designated core members, shadow members who should be kept updated by core members on PMIS activities and will act in cases when the core members are unavailable, and subject matter experts. PMIS core members and shadow members participated in Workday training during the last week of January and the first three weeks of February.

**Project Profile 4.A**

<p><b>1. Project title:</b> Improvements to Facilities: Minimum Operating Security Standards (MOSS) Upgrades and Security Measures</p>
<p><b>2. Coordinating entity:</b> Office of the Director of Administration (AM)  <b>Participating entities:</b> AM, GSO, PAHO/WHO Representative Offices (PWRs)</p>
<p><b>3. Beneficiaries:</b> PAHO staff members in PWRs.</p>
<p><b>4. Total cost (US\$):</b> \$289,756</p>
<p><b>5. Duration:</b> Project was completed by the end of 2013.</p>
<p><b>6. Comments:</b> Funds were used for various MOSS upgrades in PWR Offices across the Region:</p> <p>Radio and satellite telephone equipment was provided to PWR Offices in Bahamas, Belize, Bolivia, Chile, Colombia, Costa Rica, Dominican Republic, Guatemala, Haiti, Jamaica, and Panama.</p> <p>Fire alarms and security access systems were upgraded in PWR Offices in Bahamas, El Salvador, Guyana, Honduras, Jamaica, Peru, Suriname, Venezuela, and the Field Office in El Paso.</p> <p>Shatter-resistant film was applied in PWR Offices in Guatemala and Nicaragua.</p> <p>Emergency escape upgrades were implemented in PWR Office in Bolivia.</p>

**Project Profile 4.B**

<b>1. Project title:</b> Improvements to Facilities: Energy-Saving Measures	
<b>2. Coordinating entity:</b> Office of the Director of Administration (AM)	
<b>Participating entities:</b> AM, GSO	
<b>3. Beneficiaries:</b> Beneficiaries include the Member States because the Regional Headquarters building is a major investment needed to house the PASB and accommodate visitors to the building's conference wing. Any energy cost savings will produce more funding for technical cooperation among the Member States.	
<b>4. Total estimated cost (US\$):</b> \$2,500,000	
Contributions from the PAHO Holding Account:	\$2,500,000
Contributions from financial partners:	0
Contributions from other sources:	0
The Executive Committee approved \$620,000 in 2008-2009 for windows and \$1,100,000 in June 2010 for the HVAC (heating, ventilation, and air conditioning) project.	
<b>5. Estimated duration:</b> Each project would have a different duration, but the work would require approximately two years to be completed.	
<b>6. Comments:</b> GSO will study the options for replacement of windows in the conference rooms and the emergency stairwells of the headquarters building and refurbishment of floors 2 and 10 of the Main Building. To minimize conflict with other large projects (emergency center, plaza drains, elevators), the study was deferred until 2014-2015.	

**Project Profile 4.D**

<b>1. Project title:</b> Improvements to Facilities: Security and Sanitary Measures	
<b>2. Coordinating entity:</b> Office of the Director of Administration (AM) <b>Participating entities:</b> AM, GSO	
<b>3. Beneficiaries:</b> Beneficiaries include the Member States, because the Regional Headquarters building is a major investment needed to house the PASB and accommodate visitors to the building's conference wing.	
<b>4. Total estimated cost (US\$):</b> \$330,000	
Contributions from the PAHO Holding Account:	\$330,000
Contributions from financial partners:	0
Contributions from other sources:	0
\$330,000 provided in 2008-2009.	
<b>5. Estimated duration:</b> Work is expected to take approximately 24 months.	
<b>6. Comments:</b> The original program included the following elements:	
<ul style="list-style-type: none"> <li>• Lobby security upgrade/new ID card system/garage gate: project cost to date: \$68,500.</li> <li>• Exchange women's and men's restrooms on the 2nd floor.</li> <li>• Refurbishment/upgrades to 2nd floor reception/delegates' lounge and 1st floor lobby area.</li> <li>• Refurbishment of the restrooms elsewhere in the office tower and conference wing.</li> <li>• A new ID card system was purchased in late 2011 and various swipe card stations have been installed plus additional closed circuit TVs at risk points. Washington staff has been issued cards and the system is now functioning. A further review will be undertaken to evaluate the feasibility of implementing additional security recommendations.</li> <li>• GSO completed partial repairs several years ago with its own maintenance staff and thus delayed the need for immediate bathroom upgrades. The remaining works will be studied and evaluated in 2014.</li> </ul>	

**Project Profile 4.F**

<p><b>1. Project title:</b> Improvements to Facilities: Refurbishment of Conference Rooms and Furniture Replacement at Headquarters</p>
<p><b>2. Coordinating entity:</b> Office of the Director of Administration (AM) <b>Participating entities:</b> AM, GSO</p>
<p><b>3. Beneficiaries:</b> Beneficiaries include the Member States, because the Regional Headquarters building is a major investment needed to house the PASB and accommodate visitors to the building's conference wing.</p>
<p><b>4. Total estimated cost (US\$):</b> \$970,000</p>
<p><b>5. Duration:</b> First phase of work to conference rooms is complete; 2nd phase of work comprising furniture replacement will be reviewed in 2014 in the context of a condition assessment of PAHO HQ.</p>
<p><b>6. Comments:</b> Rooms B and C were refurbished with new furniture and audio visual equipment. New furniture and flooring and audio visual equipment was provided in Room A.</p>

<b>List of Acronyms</b>	
AM	Office of the Director of Administration
BIREME	Latin American and Caribbean Center on Health Sciences
CAREC	Caribbean Epidemiology Center
CHA	Communicable Diseases and Health Analysis
FRM	Financial Resources Management
GSO	General Services Operations
HRM	Human Resources Management
HSD	Health Surveillance and Disease Prevention and Control
HSS	Health Systems and Services
KMC	Knowledge Management and Communications
ITS	Information Technology Services
PBU	Planning and Budget
PED	Emergency Preparedness and Disaster Relief
PRO	Procurement and Supply Management
PWRs	PAHO/WHO Representative Offices

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