



PAN AMERICAN HEALTH ORGANIZATION  
WORLD HEALTH ORGANIZATION



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### **UPDATE ON THE PROCESS OF INSTITUTIONAL STRENGTHENING OF THE PAN AMERICAN SANITARY BUREAU**

In consideration of Resolution CD46.R2, this document provides a status report on the process of institutional strengthening of the Pan American Sanitary Bureau, including progress made on initiatives and institutional change being undertaken by the Secretariat. The work reflects the Bureau's commitment to the implementation of the Strategic Plan for the Pan American Sanitary Bureau for the Period 2003-2007 and incorporates the recommendations of the Working Group on PAHO in the 21st Century, Internal and External Auditors reports, and the report of the Joint Inspection Unit.

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## Introduction

1. PAHO's current institutional strengthening efforts have their origin in internally driven renewal initiatives, chiefly begun in 2003, to respond to the Strategic Plan for the Pan American Sanitary Bureau for the Period 2003-2007 (Document CSP26/10), the Managerial Strategy for the Work of the Pan American Sanitary Bureau in the Period 2003-2007 (Document CD44/5), and related resolutions. The six organizational development goals set up in the Strategic Plan are:

- (a) Communicate quality information in a timely manner to enhance the process and impact of technical cooperation.
- (b) Generate and use strategic intelligence to anticipate and increase proactive responses to future challenges and to reap the benefit of opportunities.
- (c) Become a valued member of mainstream scientific and technological networks, harnessing knowledge to address regional health development.
- (d) Become a recognized leader in transnational and global issues that affect regional and national health.
- (e) Foster a creative, competent, and committed work force that is rated exceptional by its clients.
- (f) Be a high-performance organization and set benchmarks for similar international health agencies.

2. Based on the aforementioned documents, five strategic objectives were identified, which inspired 11 initiatives that constitute the transformation Roadmap:

<b>5 Strategic Objectives for Organizational Change</b>	<b>11 Transformation Projects (Roadmap Initiatives)</b>
i. Respond better to country needs.	1. Country-Focused Cooperation 2. Country Support Unit (CSU) Organization Review
ii. Foster innovative modalities of technical cooperation.	3. Regional Public Health Programs
iii. Become a regional forum.	4. Regional Forum
iv. Become a learning, knowledge-based organization.	5. Information and Knowledge Management Strategy (IKM) Implementation 6. Leadership Development and Learning
v. Enhance management practices.	7. Resource Mobilization Strategy 8. Human Resource Strategy 9. Standards of Accountability and Transparency 10. Communication Strategy for Organizational Mobilization 11. External Communication

3. The 2006-2007 Biennial Program Budget demonstrates the incremental integration of results-based goals in its frameworks. It also indicates the direct relationship of some of the transformation projects to the regionwide expected results. The transformation projects have been developed by teams composed of Secretariat staff under the coordination of the Change Management Team. This role has been passed to the new Institutional Development Unit, which is also charged with facilitating and monitoring the implementation of results-based management (RBM). Ongoing implementation and planned outputs of the Roadmap teams directly correspond to key RBM principles and goals, as the attached matrix demonstrates.

4. A very important step in the transformation process and implementation of the Strategic Plan has been the approval of the Regional Program Budget Policy by the 45th Directing Council in September 2004. This Budget Policy represents an explicit framework for guiding resource allocation practices to attain outcomes identified in the results-based management process as well as the outcome desired in terms of the institutional change process. The new Budget Policy is strongly guided by the Country Focus and Pan American solidarity principles.

5. The Secretariat has also been involved in the renewal of the WHO Managerial Framework, and PAHO/AMRO was the first WHO Regional Office to hold a consultation with Member States on the Eleventh General Program of Work of WHO for the period 2006-2015.

6. Resolution CD46.R8 (September 2005) on the Proposed Program Budget for 2006-2007 prompted the Bureau to review functions and accountabilities and to realign the Bureau's organizational structure, particularly at the Headquarters level. The office of the Director of Program Management was eliminated and the Areas under this office were assigned to the office of the Deputy Director (Planning, Program Budget, and Project Support; Strategic Alliances and Partnerships; and Governance and Policy); or the office of the Assistant Director (Strategic Health Development, and Health Analysis and Information Systems). Further adjustments of these regroupings will be completed by mid-2006.

7. In order to ensure internal alignment, flexibility, and staff development to meet strategic results, and following a similar effort by WHO last year, the Secretariat is now implementing a Strategic Assessment and Resource Alignment (SARA) exercise, to be performed by managerial units. SARA is designed to ensure that unit objectives, functions, and resources (primarily human, but also financial and other support systems) are both well defined and clearly aligned with the Organization's strategic priorities.

8. The SARA Task Force had identified the Office of Caribbean Program Coordination (OCPC) as the pilot for the SARA exercise. A structured process with

training, methodological steps, deliverables, oversight by the Human Resources Management Area (HRM), and Staff Association involvement has been developed. The development effort involved members of multiple Headquarters units, Country Representatives, the Staff Association, and outside consultants. PAHO's Competency Maps will be used for the assessment. The new Master Standard for Post Descriptions, with training by HRM, will be employed for the classifications portion of the exercise. As the OCPC project gets under way, units from Headquarters are being identified for the next step.

9. A document on RBM (SPP40/9) was submitted to the 40th Subcommittee on Planning and Programming (SPP40) in March 2006. The document indicates that the Secretariat is developing tools in support of both its institutional transformation and RBM implementation:

- A Results-based Management Framework to empower managers, orient staff, processes, products, and services at all levels to achieve clearly stated results ensuring accountability.
- An Accountability Framework to define the flow of authority, its purpose, and how managers are accountable and responsible for exercising that authority.
- A revised delegation of authority which will be developed based on these two frameworks.

10. A methodology for the development of the Strategic Plan for 2008-2012 and the proposed Health Agenda for the Americas 2008-2017 (Document SPP40/3) was endorsed by the SPP40 in March 2006, and is being submitted concurrently with this document to the 138th Session of the Executive Committee (CE138). The development process for the Strategic Plan will include analysis of institutional changes, Roadmap initiatives, and related internal and external initiatives, reports, and programs. The Strategic Plan will also address the request in Resolution CD46.R2 (46th Directing Council, September 2005) regarding the process of institutional strengthening in PAHO).

### **Institutional Transformation—Progress Update**

11. Roadmap Initiative teams are completing major milestones. Twenty-one results were achieved out of a total expected of 48. Several activities are under way to deliver 19 additional results.

- Three initiatives (Regional Public Health Plans, Country-Focused Cooperation, and Country Support Unit Organizational Review) have established points of convergence to advance joint implementation actions. These will enable the Pan American Sanitary Bureau to respond more efficiently to the needs of the

- Member States including providing innovative modalities of technical cooperation.
- The development of the Regional Public Health Forum of the Americas is in progress and the framework is being presented to the CE138.
  - As part of becoming a learning, knowledge-based organization, several deliverables were accomplished and are in progress under the implementation process of the Information and Knowledge Management strategy (see details in the matrix below). In addition, negotiations are under way with WHO to mobilize resources to support training programs in digital literacy, strategic planning and programming, and leadership and managerial competencies (learning and leadership development initiative).
  - The Standards for Accountability and Transparency Initiative has completed several deliverables to improve accountability, transparency, and governance. (see details in the matrix below).
  - Resource Mobilization Initiatives and Regional Public Health Plans presented preliminary proposals to the SPP40 (Documents SPP40/4 and SPP40/8, respectively). Inputs received from Member States are being included, shaping the working documents.
  - The Internal Communication Strategy was approved by Executive Management. It includes several projects integrated with all other Roadmap Initiatives and addresses all the strategic organizational objectives. This initiative will support and motivate PAHO staff in the improved sharing, clarity, and transparency of communications.
  - The External Communication Initiative presented the findings from the market research which was carried out, which provides important inputs for several initiatives and decision-making.
12. All of the Roadmap Initiatives are advancing recommendations for implementation and mainstreaming by Management by the end of 2006.
13. Progress from September 2005 to date is reported in the following matrix. The matrix also provides an overview of the linkages among a range of topics defined by the Governing Bodies as constituting institutional strengthening, including the five strategic priorities highlighted by the Director at the 45th Directing Council, and the responses of the Organization to recommendations from internal and external sources. In addition, it reflects the ongoing commitment of the Secretariat to continuous institutional improvement in order to more effectively and efficiently achieve its programmatic results, as defined through the Strategic Plan and Program.

**UPDATE ON THE PROCESS OF INSTITUTIONAL STRENGTHENING WITHIN THE PASB**

<small>m</small> INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 1. RESPOND BETTER TO COUNTRY NEEDS.	
OBJECTIVES	ISSUES/ACTIONS	STATUS
<b>Improve country-focused technical cooperation.</b>	Develop an integrated national program in collaboration with the country to facilitate more efficient, results-oriented program planning and implementation. <sup>1,5</sup>	<p>The corporate operational policy paper on country-focused cooperation drafted, and 11 proposed key issues for change are under revision by the EXM<sup>m</sup>. The CFC initiative in the Americas suggests the guiding principles and the institutional changes that will allow the PASB to efficiently respond to the needs of the Member States.</p> <p>Through the Country Cooperation Strategies (CCS) processes, technical cooperation programs are increasingly country-focused and results-oriented, and involve all levels and parts of the Organization. The CCS process starts with a thorough situation analysis, and the process entails ample consultations with key players and partners in health.</p> <p>Seven CCS were completed before September 2005; seven CCS were completed or are in process between September 2005 and March 2006, including one multicountry (ECC), and 13 more CCS are planned to be conducted in 2006.</p>
	Strengthen country offices with adequate financial and programmatic authority to respond to country needs, increasing operational efficiency. <sup>1,5</sup>	PAHO is conducting reprofiling exercises to align workforce competencies in country offices with the outcomes of the CCS. PAHO is redefining its Managerial Framework and delineating a delegation of authority under the umbrella of results-based management.
	Ensure that the regional centers and country offices adopt an integrated approach and a shared agenda in consonance with the national program to ensure uniformity in programming. <sup>1,5</sup>	The Strategy for the Future of the Pan American Centers, approved by Resolution CD46.R6, is currently being implemented. Regional technical cooperation from the Area of Sustainable Development and Environmental Health (SDE) has been decentralized to CEPIS; Women and Maternal Health (FCH/WM) has been decentralized to CLAP; and the Pan American Institute for Food Protection and Zoonoses (INPPAZ) was disestablished on 31 December 2005.
	Evaluate and enhance the role of the WHO Collaborating Centers. <sup>1</sup>	The role of the PAHO/WHO Collaborating Centers in technical cooperation is being promoted and enhanced through workshops with a national (Canada, Cuba) or thematic (health and sustainable development) orientation.
<b>Strengthen the PASB's participation in technical cooperation with and among the Member States.</b>	Improve relations with ministries of health (MOH) as well as other institutions to promote a multisectoral approach to health development. <sup>1</sup>	The strategic agendas defined in the CCS include promoting a multisectoral approach to national health development. Interministerial meetings (health and agriculture, health and environment, and tripartite health, environment, and labor) were organized.

Refers to recommendations or proposed actions of: <sup>1</sup>Working Group on PAHO 21st Century, <sup>2</sup>the External Auditor, <sup>3</sup>Internal Oversight Services, <sup>4</sup>Joint Inspection Unit, <sup>5</sup>Roadmap for Change.

<b>INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007</b>	<b>STRATEGIC OBJECTIVE 1. RESPOND BETTER TO COUNTRY NEEDS.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Strengthen the PASB's participation in technical cooperation with and among the Member States. (cont.)</b>	Facilitate the identification of those public health measures that contribute to the attainment of the internationally agreed-upon health-related goals set forth in the Millennium Declaration. <sup>1</sup>	Working meetings have been held with different technical areas to define how the MDG indicators are being measured and to align them with PAHO' Basic Indicator Data Base. Knowledge has been shared and aggregated through websites, inter-American conferences, and various analytical reports (e.g. CEPAL).
	Strengthen Health Systems Planning. <sup>1</sup>	Most CCS completed thus far have identified health systems development, including health information systems (HIS), as part of the core strategic agenda. In addition, HIS are specifically identified as an important part of the BPB 2006-2007.  PAHO has been supporting Members States in the development of the MED-DEVICES (information for the network of regulatory authorities on medical devices).  Round 6 of the Global Fund focused on health systems strengthening. A Declaration on Primary Health Care was approved at the 46th Directing Council.
	Ensure access to drugs and critical supplies.  - Review the Revolving Fund for the Expanded Program on Immunization for vaccine procurement. <sup>3</sup>  - Publicize the Regional Revolving Fund for Strategic Public Health Supplies, establish an effective revolving fund mechanism, and better link the fund to technical inputs. <sup>3</sup>  - Facilitate and provide support mechanisms to help achieve economies of scale, for example, in the procurement of drugs, other strategic inputs, and health technology. <sup>1</sup>  - Support Member States in complying with international agreements and policies to ensure access to drugs and critical health supplies. <sup>1</sup>  - Support the development of national capacities for the generation of technology and production and procurement of supplies in order to (a) guarantee accessibility and (b) incorporate and utilize appropriate technology in health services. <sup>1</sup>	PAHO is in the planning stages of a ministerial-level meeting of Member States of the Fund to develop consensus regarding an affordable price for the introduction of the new rotavirus vaccine.  PAHO is being proactive in anticipating the introduction into the market of new (often highly priced) vaccines to assist MOH in making appropriate budgetary plans. Consideration is being made to recommend increasing the capitalization of the revolving fund due to the expansion of biologicals procurement.  PAHO is currently redefining the scope of technical cooperation as it pertains to the Strategic Fund. Fifteen Member States and one principal recipient signed off. Projects will continue to be identified and developed to support the capitalization of the Fund.  For the Strategic Fund, PAHO obtains advantageous prices for high-volume vaccine orders. Every effort is being made to establish annual contracts for commonly ordered pharmaceuticals as well.  PAHO has supported Members States in the implementation of Trade-related Intellectual Property Rights (TRIPS) agreement flexibilities to ensure access to medicines.  PAHO supported vaccine manufacturers (Colombia, Venezuela) in complying with good manufacturing practices (GMP) and with the prequalification of WHO (Instituto Butantan in Brazil). PAHO also supports the Ibero-American Networks on Guidelines for Clinical Practices; and the Working Groups of the Pan American Network for Drug Regulatory Harmonization (PANDRH) on Good Laboratory Practices (GPL), GMP, and rational use of drugs.

Refers to recommendations or proposed actions of: <sup>1</sup>Working Group on PAHO 21st Century, <sup>2</sup>the External Auditor, <sup>3</sup>Internal Oversight Services, <sup>4</sup>Joint Inspection Unit, <sup>5</sup>Roadmap for Change.



INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	<b>STRATEGIC OBJECTIVE 1. RESPOND BETTER TO COUNTRY NEEDS.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Strengthen the PASB's participation in technical cooperation with and among the Member States. (cont.)</b>	Assist Members States in supporting capacity building for health. - Work with Members States to strengthen national health resources, build a solid base of health professionals at the country level, and continuously educate these professionals to handle new and reemerging public health issues. Help strengthen institutional capacity in the countries' ministries of health. <sup>1</sup>	The CCS and technical cooperation among countries (TCC) identify country-based institutions that may become centers of excellence, and the subregional technical cooperation program takes into consideration those institutions that may exist at that level.  The Virtual Campus was evaluated and redefined (see comments under Become a Regional Forum for Health in the Americas)  World Health Day 2006 on human resources for health.
	- Develop international health training programs at the undergraduate level to build future capacity in international health. <sup>1</sup>  - Work with Member States to address the issues of migration of health professionals from the Region to ensure the availability of necessary health professionals within each Member State and in the Region. <sup>1</sup>	PAHO has reorganized its internship program, in order to expand its capacity to offer a high quality learning experience in international health to an increasing number of under and postgraduate students. Universities in Canada, Chile, Mexico, Puerto Rico, and the United States have placed students for a practical internship at both HQ and PWR Offices.  PAHO has developed, with the Johns Hopkins Bloomberg School of Public Health, a world-leading Web-based Certificate Program in Epidemiology for Public Health Managers. The program is recognized as the gold standard for training health executives and managers in the Americas. The Government of Brazil has provided the funds to sustain this program.  The issues of migration/retention of health professionals are being included in the technical cooperation with subregional health entities, with emphasis also on accreditation. The Regional Network of Observatories of Human Resources for Health and the Toronto Call to Action highlighted the growing importance of migration and supported the production of required data and information.
<b>STRATEGIC OBJECTIVE 2. FOSTER INNOVATIVE MODALITIES OF TECHNICAL COOPERATION.</b>		
<b>Develop/strengthen new modalities of work.</b>	Support as an active partner technical cooperation with and among the Member States to address selected priorities for the achievement of goals agreed-upon collectively by countries, and where the Secretariat coordinates and harmonizes efforts with several national and international partners. <sup>1,5</sup>	PAHO presented to the SPP the conceptual framework for Regional Public Health Plans (SPP40/8). The implementation process is in progress.  Twenty three TCC projects were approved in 2005. The TCC's Web page for user information exchange contributes to improving monitoring and evaluation processes.

Refers to recommendations or proposed actions of: <sup>1</sup>Working Group on PAHO 21st Century, <sup>2</sup>the External Auditor, <sup>3</sup>Internal Oversight Services, <sup>4</sup>Joint Inspection Unit, <sup>5</sup>Roadmap for Change.

<b>INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007</b>	<b>STRATEGIC OBJECTIVE 2. FOSTER INNOVATIVE MODALITIES OF TECHNICAL COOPERATIONS.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Develop/strengthen new modalities of work.</b> <i>(cont.)</i>	Develop and/or strengthen new modalities of cross-functional work through flexible working groups and task forces. <sup>1,5</sup>	Working groups and task forces are functioning, for example, Epidemic Alert and Response; Regional Strategy and Plan of Action on Nutrition and Development; Regional Strategy on an Integrated Approach to the Prevention and Control of Chronic Diseases; Regional Plan on HIV/AIDS 2006-2015.
	Cooperate in the definition of regional and subregional needs in health, promoting the use of cost-effective interventions and regional public goods, and coordinating with other sectors. <sup>1</sup>	PAHO's Regional Malaria Program clarified and defined regional and subregional health needs during the Regional Meeting of the Directors of Epidemiology and National Malaria Programs in November 2005. The meeting further identified stronger regional, subregional, and other forms of intercountry collaboration.
<b>Support subregional integration process in the Americas.</b>	Support countries in giving health its proper place on the subregional and regional political agenda. <sup>1,5</sup>	Subregional ministerial meetings were supported (RESSCAD, MERCOSUR, CARICOM, Amazon Cooperation Treaty Organization (ACTO), Convenio Hipolito Unánue, and COMISCA.
<b>Strengthen coordination and develop associations and strategic alliances.</b>	Improve the coordination of PAHO activities with other agencies of the United Nations system and the International Financing Institutions (IFIs). <sup>1,5</sup>	PAHO participates in multiple interagency activities as well as with the IDB, the World Bank, USAID, CDC, etc., e.g. Inter-American Coalition for the Prevention of Violence, Summit Implementation and Review Group (SIRG) of the Summit of the Americas, and Regional Directors Group of the UN agencies, among others. Most notable recently are the coordinating efforts regarding the Avian Flu.
	Enhance, strengthen, and clarify its relationship with the inter-American system. <sup>1,5</sup>	<p>PAHO has aggressively pursued relationship enhancements (e.g. briefing the OAS Permanent Council re the potential pandemic, initiating multiple activities with sub-regional health entities, supporting Member States in the Declaration and Plans of Action of the Summit of the Americas, etc.). In the IV Summit of the Americas, PAHO helped the Member States include health mandates that include health at the workplace, fighting HIV/AIDS, and other diseases. Improving coverage of social protection and preparedness plans for Avian Flu and Pandemic Influenza. All of them are included in the Declaration of Mar del Plata and in the Plan of Action.</p> <p>PAHO continues to lead the effort for national preparedness plans on the Avian Flu. USAID and Canada, pledged more than US\$ 2 million for strengthening the technical cooperation in preparedness for Pandemic Influenza and Avian Flu in the Region.</p> <p>PAHO, a founding member of the Regional Directors Group of UNAIDS Cosponsoring Agencies, participated in a February 2006 meeting to strengthen joint UN country-level support against HIV/AIDS and to engage a dialogue with the Global Fund against Aids, TB, and Malaria. PAHO is organizing a special lunch in June for Presidents and Prime Ministers from LAC countries attending the post-UNGASS high-level review meeting on HIV/AIDS. A technical side event is also being organized to highlight the plight of LAC for universal access to HIV/AIDS prevention, treatment, and care.</p>

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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	<b>STRATEGIC OBJECTIVE 2. FOSTER INNOVATIVE MODALITIES OF TECHNICAL COOPERATION.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Strengthen coordination and develop associations and strategic alliances.</b> <i>(cont.)</i>	Enhance, strengthen, and clarify its relationship with the inter-American system. <sup>1,5</sup> (cont.)  Work with its sister agencies to simplify and harmonize the mandatory reporting processes that are requested from Member States. <sup>1</sup>	Four Ibero-American health networks were created (Granada 2005). These are: transplants, health education and research, tobacco control, and essential medicines and related policies, coordinated by Spain, Costa Rica, Brazil, and Argentina, respectively).  In 2005, PAHO was the Quality Support and Assurance (QSA) focal point for the Common Country Assessment/U.N. Development Assistance Framework (CCA/UNDAF) for the Dominican Republic and El Salvador, and actively participated in CCA/UNDAF exercises through the U.N. Country Teams in 8 roll-out countries. In 2006, PAHO will assume the QSA of the CCA/UNDAF exercise in Cuba and participate in the CCA/UNDAF exercises of 9 roll-out countries.
	Collect, analyze, and disseminate information to Members States to identify Official Development Assistance (ODA) trends to support technical cooperation activities. <sup>1</sup>	PAHO monitors on a regular basis the data of the Organization for Economic Cooperation and Development on levels and trends in ODA. It disseminates this data through briefings within the Secretariat and will disseminate this information to countries through a bulletin/web site by the fourth quarter of 2006.
	Facilitate and strengthen horizontal cooperation among the countries of the Region for the creation of strategic partnerships with other Member States and with public and private actors who, at the global level, have gained a reputation in the field of international health. <sup>1,5</sup>	PAHO is reviewing its external relations/resource mobilization functions PAHO aggressively supports horizontal cooperation opportunities, most recently with the II South American Meeting on International Cooperation in Health (Ministries of Health offices of international relations (OIRs) of all Andean Countries).  The Working Group of the Executive Committee on Streamlining the Governance Mechanisms of PAHO determined that the relationship with civil society organizations was outside of its mandate and referred it to the Executive Committee for subsequent consideration. The issue related to the Standing Committee on NGOs is included in the Terms of Reference of the Working Group and will be discussed at the meeting immediately after the SPP.  PAHO has successfully implemented the mobilization of voluntary financial resources from SIDA, US\$ 6 million over 3 years; USAID, US\$ 13.2 million over three years plus \$1.3 million pledged for Pandemic Influenza for one year ; Spain, US\$ 6 million over 3 years; and Canada, Can\$ 18 million??? over 4 years, in support of regional Areas of Work.  Through multiple mechanisms, including an accessible SharePoint site that houses a TCC database, PAHO identifies issues and maintains information facilitating cooperation among various health resources.

Refers to recommendations or proposed actions of: <sup>1</sup>Working Group on PAHO 21st Century, <sup>2</sup>the External Auditor, <sup>3</sup>Internal Oversight Services, <sup>4</sup>Joint Inspection Unit, <sup>5</sup>Roadmap for Change.

INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	<b>STRATEGIC OBJECTIVE 2. FOSTER INNOVATIVE MODALITIES OF TECHNICAL COOPERATION.</b>	
OBJECTIVES	ISSUES/ACTIONS	STATUS
<b>Strengthen coordination and develop associations and strategic alliances.</b> <i>(cont.)</i>	Establish appropriate policies and guidelines to cover the management of relationships with third-party organizations, <sup>1,5</sup> including, for example, ethical standards and use of the PAHO logo. <sup>2,5</sup>	Guidelines have been developed to evaluate the suitability of the Organization's potential collaboration with third parties. PAHO's newly adopted Code of Ethical Principles and Conduct covers relations with partner entities. PAHO contracts and agreements undergo institutional review to ensure compliance with rules and regulations, including proper use and control of the PAHO logo by its partners.
	Establish base agreement standards to define the relationship, roles, and responsibilities of the parties in individual cases. <sup>2,5</sup>	Potential collaboration with third parties will be supported by agreements to ensure that funds received by PAHO are properly administered.
<b>Improve acquisition and utilization of financial resources and investment.</b>	Develop and maintain guidelines and principles for its long-term strategic plan for resource mobilization, and clearly define the role with partners. <sup>4,5</sup>	PAHO presented to the SPP40 (March 2006) an analysis of the Resource Mobilization capacity and practices.
	Strengthen the capacity of Member States to increase their capacity to mobilize additional resources by providing information on new financial cooperation modalities, health financial opportunities, and interventions that respond to regional and subregional needs. <sup>1</sup>	PAHO will host a Central American workshop to build national capacity in external relations and resource mobilization. This will benefit from the collaboration of various OIRs of the ministries of health in the Region and counterparts at the ministries of foreign affairs. PAHO will increase its dissemination of this information to countries through a bulletin/Website by the fourth quarter of 2006.
<b>STRATEGIC OBJECTIVE 3. BECOME A REGIONAL FORUM FOR HEALTH IN THE AMERICAS.</b>		
<b>Facilitate dialogue leading to the establishment of national, regional, and global health policies and active plans.</b>	Facilitate virtual collaborative sites as a regional or global leader for activities with external partners. <sup>1,5</sup>	PAHO hosts relevant SharePoint sites with external partners, for example, the Health Analysis and Information System (AIS), Millennium Development Goals, Pandemic Influenza Task Force, TAC on HIV/STI, Ibero-American Networks on Guidelines for Clinical Practices, the Executive Committee, WHO Executive Board, etc.
<b>Create a platform for consensus building among various key actors and institutions to improve public health knowledge and actions in the Region to complement PAHO's traditional governance and policy-making.</b>	Stimulate and facilitate discussions in support of innovations in science, technology, research, strategic inputs, and information to enable the development of national policies. <sup>1,5</sup>	The Regional Forum for Public Health is developing collaborative scientific networking platforms to reach the best academic, civil society, and scientific institutions and experts in the Americas in order to transform developments in public health knowledge into more equitable and effective health policies and programs. Public health institutions in Argentina, Brazil, Chile, Colombia, and the United States are developing national forums to link with PAHO's Regional Forum for Public Health. Knowledge management (KM) training and the nurturing of cross-functional communities of practice throughout PAHO and with partners will greatly improve sharing and learning among peers of various professions.

Refers to recommendations or proposed actions of: <sup>1</sup>Working Group on PAHO 21st Century, <sup>2</sup>the External Auditor, <sup>3</sup>Internal Oversight Services, <sup>4</sup>Joint Inspection Unit, <sup>5</sup>Roadmap for Change.

<b>INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007</b>	<b>STRATEGIC OBJECTIVE 3. BECOME A REGIONAL FORUM FOR HEALTH IN THE AMERICAS.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Create a platform for consensus building to complement PAHO's traditional governance and policy-making.</b> <i>(cont.)</i>	Establish relationships with universities in the Region to develop and maintain the necessary expertise to face the coming challenges in the public health field. <sup>1,5</sup>	The Regional Forum for Public Health is organizing a network of key academic institutions and public health experts in the Region to review, debate, and propose important changes in the diffusion of public health knowledge into effective action.
<b>Reorient the Strategic Model of the Virtual Public Health Campus (VPHC) to improve in-service training, and thereby positively affect performance and target competency development.</b>	Redefine the Strategic Model of the VPHC as a Regional Forum and virtual space for the development of human resources in public health in the Region. <sup>1,5</sup>	The Virtual Public Health Campus has concluded its pilot phase (period 2003-2005). More than 80 mentors for distance learning were identified; training is being provided for 250 workers in priority public health subjects. The evaluation of this pilot phase is completed. The result is a reorientation of the Strategic Model, with a decentralized, open network approach. Institutions from six countries are currently involved in the new design of the Campus with the technical assistance of INFOMED. The second phase planned for 2006-2007, aims at 20 participating institutions. Support will employ an interface of the VPHC with the System of Virtual Libraries of Health (BIREME) and PAHO's information and knowledge management policy.
<b>STRATEGIC OBJECTIVE 4. BECOME A KNOWLEDGE-BASED/LEARNING ORGANIZATION.</b>		
<b>Network and share knowledge within the Organization and between the Organization and its constituencies.</b>	<p>Reduce the existing gap between the generation of knowledge and its application by decision-makers.<sup>1,5</sup></p> <p>Support the production, processing, and dissemination of information to ensure its high quality and accessibility to the countries and subregional blocs as a step toward helping the countries to develop policies to address health measures.<sup>1,5</sup></p> <p>Develop mechanisms known as "best practices" that help Member States identify, build, take advantage of, and export their experiences, capacities, and strengths.<sup>1,5</sup></p>	<p>The CCS includes Information and Knowledge Management as part of the core strategic agenda. A Web-based information-sharing site is actively in development for use with and among countries. Additionally, the Organization's information dissemination policy and strategy are under formal review, taking into consideration means to more actively engage Member States in the collection and utilization of public health information.</p> <p>An initiative is under way that will result by mid-2006 in better integration of the PAHO Website with other public health sites and online tools.</p> <p>Additionally, a "lessons learned and effective practices" system for PAHO and its partners is under design and will be implemented in the fourth quarter of 2006.</p> <p>Through the CCS exercises, PAHO identifies recommendations for best practices and lessons learned, both in specific technical subjects as well as in the modalities of technical cooperation. A "lessons learned and effective practices" system for PAHO and its partners is in design and will be implemented in the fourth quarter of 2006.</p> <p>Knowledge management training and the nurturing of communities of practice cross-functionally throughout PAHO, and with PAHO partners, will greatly improve sharing and learning among peers of various professions.</p>

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<b>INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007</b>	<b>STRATEGIC OBJECTIVE 4. BECOME A KNOWLEDGE-BASED/LEARNING ORGANIZATION.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Network and share knowledge within the Organization and between the Organization and its constituencies.</b> <i>(cont.)</i>	Create virtual collaborative work spaces. SharePoint was identified as the appropriate platform to support cross-organizational teams, more efficient collaboration in preparing documents, and the consolidation of information and sharing of knowledge among groups of individuals, including external partners. <sup>1,5</sup>	41 collaborative sharing spaces/sites, each with 3 to 50 subsites have been created thus far and a cross-functional team including Information Technology Services (ITS), Information and Knowledge Management (IKM) staff, and outside experts is in place. On the average, over 300 staff members and partners collaborate in these sites each week. On the average, these sites are collectively visited over 2,000 times each week.  IKM has also hosted at least 11 SharePoint sites as a regional or global leader for activities with external partners.
<b>STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES.</b>		
<b>Align with the WHO framework for results-based management to improve planning, implementation, and monitoring of PAHO's overall strategy.</b>	Focus the management of country programs on the WHO General Program of Work, national objectives, and global targets. Align strategies with those of WHO to enhance the relationship between the two organizations and generate opportunities to improve health in the Region. <sup>1</sup>	Alignment with WHO has and will continue at the strategic level. Use of WHO RBM tools and participation in WHO planning processes is ongoing.  The reviews of the BPB 2004-2005 and BPB 2006-2007 took into consideration national objectives and global targets, as well as the extent to which the technical programs addressed them. Country Program Analyst visits to selected countries also provided opportunities to monitor technical program implementation and effectiveness in meeting global and national objectives.  AMRO actively participates in the Country Support Unit Network to ensure sharing of lessons learned and improve coherence among WHO Regions with respect to Country Programs and Country Presence.
	Revise the strategic and operational planning cycles and supporting instruments. Align the objectives with organizational goals, ensuring plans are developed for the regional, subregional, and country-specific levels. <sup>4</sup>	The methodology for development of the new Health Agenda for the Americas and the next Strategic Plan, reviewed by the SPP, elaborates a process that will ensure this occurs.
	Define clear criteria for grouping Areas of Work into appropriations categories and the organizational units responsible for implementation. <sup>4</sup>	Completed. Note that Areas of Work will no longer be used after the 2006-2007 biennium.
	Strengthen evaluation and oversight. Ensure that evaluation findings and lessons learned are fed back into the planning, programming, and budgeting process. <sup>4</sup>	The Internal Oversight Services Unit (IOS) has been expanded to include audit, investigation, and evaluation functions. Definition of supervisory lines with WHO are under way.  The Country Support Unit contributed to the follow-up of evaluation findings and highlighting of lessons learned through the following: country office monitoring visits, BPB review (including self-evaluations of Country Programs by Country Teams), and constant communication, support, and feedback to country offices.

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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	<b>STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<b>Improve accountability, transparency, and governance.</b>	<p>Work with the Governing Bodies to define the role of Governing Bodies committees responsible to assess productivity, quality of service, efficiency, and cost-effectiveness, as well as establish criteria for measuring impact, outcome, and success of programs in addition to expenditure review.<sup>1</sup></p> <p>Provide in advance of the Governing Body meetings all documents related to agenda items via the Web page for rapid and easy access by users inside and outside the Organization, in accordance with procedures.<sup>1</sup></p> <p>Review the term of office of the External Auditor in line with the practice of other United Nations system organizations.<sup>4</sup></p> <p>Develop an RBM corporate conceptual framework. Elaborate a system of delegation of authority proposing a clear division of responsibilities for actors involved in the RBM implementation (Members States, PAHO Secretariat, and internal and external oversight bodies).<sup>4</sup></p>	<p>Addressed by the Working Group on Streamlining Governance.</p> <p>Beginning with the upcoming Executive Committee, documents for agenda items proposed by Member States are being circulated first to <i>proposing</i> States and afterwards to all CE Members.</p> <p>Beginning in 2000, documents have been transmitted electronically to Member States. In September 2005, the Secretariat reached the target of 95% of documents being dispatched by the deadline indicated in the Rules of Procedure.</p> <p>The Director will present this issue for approval of the Directing Council in September 2006, and there will be a call for nominations for the office of External Auditor.</p> <p>The Organization is developing its Managerial Framework, inclusive of delegation of authority, in conjunction with its implementation of results-based management and identifying roles and responsibilities for all actors in PAHO's RBM program. This effort is tied to the newly created Institutional Development Unit.</p>
	<p>In country offices, improve compliance with respect to controls over contracting activities, accounting transactions, inventory controls, proper segregation of duties for major computer systems, and off-site storage of back-up data.<sup>3</sup></p>	<p>Compliance is reviewed periodically, or immediately in the case of a noted problem, to ensure that these rules and regulations are followed. Bank reconciliations are scrutinized regularly. The levels of authority and the submission of bids and recommendations to the procurement and purchasing committees are strictly enforced. Off-site storage is now the policy for all PAHO sites.</p>
	<p>Strengthen individual and corporate accountability.</p> <ul style="list-style-type: none"> <li>- Develop a framework of ethical principles for the conduct of the Organization's business and the guidance of staff.<sup>2,5</sup></li> <li>- Establish clear and transparent procedures for investigating alleged breaches of the Code or failure to declare conflicts of interest.<sup>2,5</sup></li> <li>- Provide periodic internal audit reports to the Executive Committee.</li> <li>- Strengthen the internal communication to support team collaboration as well as the free flow of information among staff.<sup>5</sup></li> </ul>	<p>PAHO drafted and adopted a Code of Ethical Principles and Conduct that specifically addresses both behavior and staff confirmation of understanding and compliance, inclusive of a Declaration of Interest, as appropriate. Additionally, the Ombudsman post was filled in October 2005, the Ethics Officer position has been established and appointed, and a Conflict Management System is under development to address related procedures.</p> <p>By Resolution CD46.R2 WHO's Office of Internal Oversight Services was requested to report annually to the Executive Committee.</p> <p>Based on feedback from EXM, the Internal Communication Strategy Team is working to finalize sequencing and mapping of the projects proposed. The Institutional Development Unit will lead in the implementation through a collaborative team presented by key Areas of the organization during 2006.</p>

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<div style="text-align: center;">                     INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007                 </div>	<b>STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES.</b>	
<b>OBJECTIVES</b>	<b>ISSUES/ACTIONS</b>	<b>STATUS</b>
<p><b>Take measures to improve efficiency.</b></p>	<p>Develop effective IT strategic planning.</p> <ul style="list-style-type: none"> <li>- Complete IT Strategy and implement with funding assigned. Give priority to further automate work processes and decision-making for efficiency gains.<sup>4</sup></li> <li>- Review periodically progress made in the implementation of the information and knowledge management strategy throughout the Organization.<sup>4,5</sup></li> <li>- Include goals and related incentives/rewards for knowledge sharing in the individual performance planning and evaluation system.<sup>4,5</sup></li> </ul> <p>Enhance IT Security.</p> <p>IT Security program is established; resultant policies are disseminated and enforced.<sup>1</sup></p>	<p>The IT Strategy was completed in 2005. The joint IT and KM Governance Board is being established to assign priorities and monitor progress on IT- and KM-related initiatives, as well as to assist in resource mobilization for such activities.</p> <p>PAHO hired an IT Security Officer effective October 2005. The first of many in-process security policies has been issued.</p>
<p><b>Effectively manage human resources across the Organization.</b></p>	<p>Improve leadership and management competencies for supervisors, particularly for staff development and learning activities, as well as strategic planning, knowledge management, networking and building partnerships, team leadership, performance assessment, and project management.<sup>1,5</sup></p> <p>Improve matching between human resource profiles to programmatic needs and work environment in country offices.<sup>1</sup></p> <p>Strengthen the country offices with experts in negotiation and resource mobilization, providing direct support in their technical assistance to the countries.<sup>1</sup></p>	<p>Each office is required to prepare and execute an annual learning plan in order to enhance the skills and competencies of its personnel. All managers from country and regional levels participated in the Global Leadership Program. Further, CSU developed and piloted guidelines for the formulation of Country Office Development Plans, based on the CCS. IKM is executing a Knowledge Management Awareness and Training Program (throughout 2006), reaching more than 400 staff members across the Region.</p> <p>In 2006, the Organization will be carrying out reprofiling exercises in the country offices to ensure that personnel competencies are consistent with the technical demands and health needs of the host country. Further, on a regular basis, CSU analyzes, coordinates, and participates in reprofiling based on the needs articulated in the CCS.</p> <p>An update to the PAHO core competencies is under way and will address competencies required at the country level for staff and contract personnel.</p> <p>The country offices in Priority Countries have been strengthened with Program Officers. The functions of these new staff include support to national health development through negotiations with other sectors and resource mobilization, as well as donor coordination.</p>

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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES.	
OBJECTIVES	ISSUES/ACTIONS	STATUS
<b>Effectively manage human resources across the Organization.</b> (cont.)	<p>Improve the performance management system.<sup>1,4,5</sup></p>	<p>The Human Resource (HR) Strategy initiative is conducting a comprehensive review of the HR performance management system to ascertain what improvements need to be made. An analysis of various appraisal processes, including 360-degree performance assessment, will be included in the review.</p> <p>The Performance Evaluation system has been automated and is being tested, with full implementation planned during 2006. This system will allow management to monitor compliance with the policy of 6-month and annual performance reviews.</p>
	<p>Enhance the recruitment and hiring process.</p> <ul style="list-style-type: none"> <li>- Review the recruitment and staff development process.<sup>4,5</sup></li> <li>- Apply the same standards and considerations to internal appointments as apply to external recruitment and placement.<sup>2</sup></li> <li>- Recruit all STCs/STPs based on open competition in all but the most exceptional circumstances.<sup>4</sup> Maintain an up-to-date list of accredited short-term consultants and other temporary personnel based on a clear policy for assessing their expertise, competence, and suitability for employment.<sup>2,5</sup></li> </ul>	<p>Several cross-organizational reviews are planned for 2006, such as the equitable grading and distribution of G-level staff. The HR Strategy initiative is also exploring the implementation of “generic” post descriptions for similar positions.</p> <p>The same standards apply to both internal and external candidates. Any future change to the current selection and recruitment procedures for the engagement of fixed-term staff will apply equally to internal and external candidates.</p> <p>The Organization has entered into a contract for the development of an automated data base.</p> <p>A new policy document has been drafted to require competitive hiring processes for STPs and STCs, except for short assignments and emergency situations.</p>
	<ul style="list-style-type: none"> <li>- Develop a more formal transparent process for selecting candidates for the top senior posts in the Organization.<sup>1</sup></li> </ul>	<p>The Working Group on Streamlining Governance has focused on the lack of explicit post descriptions, terms of reference, and minimum requirements for senior posts (DD, AD, AM) and is working with the Secretariat to acquire additional information.</p>
	<p>Increase rotation, decentralization, and interagency movement of staff.</p> <ul style="list-style-type: none"> <li>- Decentralize technical staff and resources from Headquarters to the country level in order to strengthen the performance of country offices, improve the use of PAHO’s resources within countries, and develop a strategic approach to PAHO’s cooperation with countries.<sup>1,5</sup></li> <li>- Develop a coherent strategic approach to the current decentralization process, in line with the reforms proposed by the U.N. Secretary-General.<sup>4</sup></li> <li>- Establish formal, transparent processes and systems for the transfer, exchange, or hiring of national technical staff for cooperative activities.<sup>1,5</sup></li> </ul>	<p>In line with the Strategy for the Future of the Pan American Centers, approved by Resolution CD46.R6, CCS methodology was applied to define a strategic agenda with countries.</p> <p>The managerial package involving allocation of human resources (program-budget implications, as well as supervision and evaluation) is being developed.</p> <p>The recently vendor-awarded Expertise Locator system will improve the identification of experts and the transparency of the recruitment process, while leveling chances for candidates in all countries. The system is expected to be operational by September 2006.</p>

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INSTITUTIONAL TRANSFORMATION STRATEGIC PLAN 2003-2007	STRATEGIC OBJECTIVE 5. ENHANCE OUR MANAGEMENT PRACTICES.	
OBJECTIVES	ISSUES/ACTIONS	STATUS
<p><b>Effectively manage human resources across the Organization. (cont.)</b></p>	<p>Establish and disseminate clear policy and procedures for addressing complaints and allegations.</p> <ul style="list-style-type: none"> <li>- Develop and communicate clear procedures for addressing complaints and allegations.<sup>2,5</sup></li> <li>- Establish a clear policy for determining the circumstances in which complaints should be investigated and who should be involved. Design clear protocols for the methodology used for the investigation and reporting of the outcome.<sup>2,5</sup></li> <li>- Provide access to a confidential hotline to raise concerns in the event that staff concerns cannot be resolved through the manager or supervisor.<sup>2,5</sup></li> </ul>	<p>The Standards for Accountability and Transparency Team is in place to conduct governance improvements. The Integrity and Conflict Management System, which is under development, will include a clear map and description of the multiple options available to staff, including the responsibilities, timetables, specific procedures to be followed, investigative guidelines, and outcome reporting. The system will include formal as well as informal resources, including access to managers and supervisors, an Ethics Officer, a hotline, an ombudsperson, the Staff Association, grievance and appeals mechanisms, and other human resources, including legal and audit personnel.</p> <p>Specific investigative protocols and procedures are under development within the articulation of the Integrity and Conflict Management System.</p> <p>The Code of Ethical Principles and Conduct guarantees confidential treatment of staff information. Furthermore, the confidential hotline as well as the independence of the Ethics Officer will further guard confidentiality and protect against retaliation.</p>

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### **Lessons Learned from the Experience of the Past Year**

14. Institutional strengthening ultimately is an evolutionary process in which the Secretariat adapts to external reality and countries needs. Meaningful organizational change takes time, requires stakeholder engagement, and is complex, especially in an organization whose legacy exceeds a century, serves many countries, and operates under several layers of mandates.

15. Preparations to address the avian flu pandemic provided the Organization the opportunity to show its leadership by putting this public health subject on the Governments' agenda. These actions facilitated the strategic positioning of PAHO to attain agreement regarding multiagency responsibilities.

16. The institutional strengthening efforts and resulting convergences were a learning and growth experience for the Organization last year. The participatory processes followed and multifunctional team compositions promoted staff engagement, integration, and the elimination of artificial boundaries.

17. Changes in the Pan American Center for Sanitary Engineering and Environmental Science (CEPIS) and the Latin American Center for Perinatology and Human Development (CLAP) (with the dissolution of the Pan American Institute for Food Protection and Zoonoses (INPPAZ)) were carried out transparently and in a timely manner.

18. A study conducted in 2005 among Member States, stakeholders, and staff sought to ascertain what the expectations of the international health community were for the Pan American Health Organization. The findings pointed to a need for better and more transparent communication, acceleration of the pace of change, greater efficiency, and more cohesive leadership. These findings also validated the institutional-transformation trends and policy decisions regarding greater decentralization, more focused technical cooperation, priority attention to the most vulnerable groups, and emphasis on inter-institutional and intersectoral alliances. PAHO was perceived to have a critical role and a unique position in public health development with its vast technical expertise, profound knowledge of issues, physical country presence, close relationship with national health authorities, and dedicated staff.

19. Experience from the Roadmap process indicates that PAHO is an attractive partner, among whose strengths is the ability to convene the many players in the international health community. The process is also teaching the following lessons:

- Validation and continuation of the focus on countries.

- The need to shift the regional program paradigm from an internal approach to one of collective action by countries and stakeholders, with PAHO technical support focusing on priorities.
- The importance of an ongoing response to shareholder, stakeholder, and staff expectations, including recognition of and response to ethical concerns and relationships.
- The need to develop staff competencies in leadership, health situation analysis, planning, knowledge sharing, and resource mobilization.
- Commitment to the institutional transformation process by Executive Management and Member States, and to the values of the Organization by all staff.
- Collaboration that is horizontal and interdisciplinary is required to improve results.
- Communication regarding the process, results, impact, and next steps, which is best achieved by coupling information technology with face-to-face interactions.

20. These findings, as well as the mandate of Resolution CD46.R2, relate to the process of PASB institutional strengthening, are being taken into consideration by the Secretariat, and will guide organizational change.

21. The 2005 Annual Managers Meeting was also a milestone in the change process since it enabled team leaders of the Roadmap Initiatives to share and validate their efforts, as well as receive focused input.

### **Looking Ahead**

22. The period 2006-2007 will be a time of accelerated action, building on the momentum created during 2003-2005 to ensure the accomplishment of the Strategic Plan commitments. The cornerstone of the strengthening process will be the transition from Roadmap internal initiatives to mainstreaming work implementation and the full incorporation of the recommendations from external initiatives (PAHO in the 21st Century, Internal and External Audit reports, and the Joint Inspection Unit report).

23. The next two years will emphasize the completion of these important initiatives which will transform the Bureau's structure and delivery mechanisms. The management tools and frameworks put in place in 2004 and early 2005 will enable PAHO to move forward with confidence and commitment. Throughout this process, Member States will be consulted continually.