

The Global Plan to Stop TB 2016 - 2020

The Executive Committee Start-up Team

At its meeting 1 February 2014, The Executive Committee discussed the need for a Task Force to help guide the Global Plan and the composition of the Task Force to ensure a broad representation of all constituencies and stakeholders in the creation of the Plan.

The Executive Committee agreed to set up a “start-up team” to create the Task Force and to help with a conceptual framework which outlines all the aspects needed to begin development of the Global Plan.

The members of this Start-up Team were EC representatives Austin Obiefuna, Cheri Vincent, Aaron Oxley and Mario Raviglione.

The Start-up Team has had regular conference calls with the Secretariat since its creation. It has overseen the creation of TORs for the Task Force and decided on the selection process for the Task Force members. It has overseen the call for applications to the Task Force, reviewed the list of candidates for the Task Force and made a selection of its members, based on the Secretariat’s short-list of suitable candidates.

The Task Force

The Task Force will ensure the overall technical validity of the Global Plan. It will shape the draft Plan by setting priorities based on its technical expertise, ensure the quality of the inputs to the Plan and comment on draft texts for the Plan. In terms of actual tasks, the Task Force will:

- Provide oversight of the 2016-2020 Global Plan development process.
- Provide technical advice and recommendations on:
 - structure of the Global Plan;
 - regional and country models and modelling;
 - innovation section; and
 - review and feedback on drafts of the Global plan.
- Monitor the implementation of activities for the development of the Global Plan.
- Advise the Executive Committee on the implications (financial or operational) of any proposed changes to the Global Plan development process.
- Report to the Executive Committee every two months/regularly on the progress of development.

Task Force Operations and Interactions

The Task Force is not a decision-making body. However, by advising the Project Management Team (Stop TB Partnership Secretariat/Project Leader) and putting forward recommendations on all aspects of the Global Plan development process for Executive Committee approval, it plays a crucial role in setting the direction for and in shaping the Global Plan, which will guide national operational plans and targets worldwide for the period 2016 – 2020.

The Task Force reports directly to the Executive Committee (EC) of the Stop TB Coordinating Board through its Chair. When items are put forward by the Task Force to the Executive Committee for its decision, the Chair of the Task Force will be responsible for representing the Task Force during EC deliberations.

The Task Force will be involved in all phases of the Global Plan Development and thus will require that members commit to conference calls on average twice a month as well as two face-to-face meetings. This will be in addition to the time required to review documents and provide timely comments which will involve a significant demand on their time for the duration of the Global Plan development.

It is expected that the work load of the Task Force will be on average 10% of one year's work, with a concentration of work hours during the first two months (late May to mid-July) and February through May, 2015. Membership in the Task Force will not be remunerated, but costs (for travel and other related expenses) will be covered.

Task Force Composition

The composition of the Task Force shall include 1 Chair and 10 members.

Membership shall be skills-based according to experience and knowledge needed to give constructive advice on various aspects of the development of the Global Plan as listed in the Task Force Roles and Responsibilities section. The Chair will be selected by the Task Force Members among its own members.

The proposed composition of the Task Force is as follows:

1. Health Analysis and Modelling Specialist: **Richard White/Rein Houben, TB-Mac/LSHTM**
2. TB Costing and Economics Specialist: **Theo Vos, IHME**
3. Global TB Programmatic and Operational Adviser: **Amy Bloom, USAID**
4. New Tools Researcher: **David Lewinsohn, Portland VA Medical Center**
5. High TB Burden Country Programme Representative: **Draurio Barreira, Brazil**
6. High TB Burden Country Programme Representative 2: **TBC**
7. Specialist on Global Advocacy: **Aaron Oxley, RESULTS UK**
8. External Relations and Health Diplomacy Strategist: **Michel Kazatchkine UNSGO/UNAIDS**
9. Community Systems and Community Engagement Advisor: **Blessina Kumar, Global Coalition of TB Activists**
10. Representative from WHO Global TB Programme: **Knut Lönnroth / Mukund Uplekar**
11. Representative from Stop TB Partnership Secretariat: **Jon Lidén**

In the selection of members, emphasis was placed on professional excellence, experience and breadth of knowledge within each field. Any member would need to have a minimum of 15 years of professional experience, ten of which must be within the speciality of the position applied for to be considered. Candidates were selected based on the balance of their general experience as well as the specific criteria for each position.