



**World Health
Organization**

REGIONAL OFFICE FOR **Europe**

Regional Committee for Europe

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Membership of WHO bodies and committees

In accordance with rules 14.2.2 and 14.3 of the WHO Regional Committee for Europe's rules of procedure, the Regional Director, by circular letter of 9 January 2017, invited all Member States of the European Region to submit, by 10 March 2017, nominations for membership of the:

- Executive Board;
- Standing Committee of the Regional Committee for Europe; and
- Policy and Coordination Committee of the Special Programme of Research, Development and Research Training in Human Reproduction.

Given that the WHO Regional Office for Europe had not received a sufficient number of nominations to the Standing Committee by the deadline of 10 March 2017, the Regional Director, in a letter dated 31 March, informed Member States that the deadline of the call for nominations to the Standing Committee for countries in Group A had been extended to 28 April 2017.

This document contains, for each of the above bodies, the terms of reference, an overview of the membership of the body in question, and the curricula vitae of the candidates and letters of intent (where applicable) received by the Secretariat in accordance with the aforementioned deadlines.

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I. Executive Board of the World Health Organization

Functions

1. Article 28 of the Constitution of the World Health Organization (WHO) stipulates that the functions of the Executive Board shall be:

- (a) to give effect to the decisions and policies of the Health Assembly;
- (b) to act as the executive organ of the Health Assembly;
- (c) to perform any other functions entrusted to it by the Health Assembly;
- (d) to advise the Health Assembly on questions referred to it by that body and on matters assigned to the Organization by conventions, agreements and regulations;
- (e) to submit advice or proposals to the Health Assembly on its own initiative;
- (f) to prepare the agenda of meetings of the Health Assembly;
- (g) to submit to the Health Assembly for consideration and approval a general programme of work covering a specific period;
- (h) to study all questions within its competence;
- (i) to take emergency measures within the functions and financial resources of the Organization to deal with events requiring immediate action. In particular it may authorize the Director-General to take the necessary steps to combat epidemics, to participate in the organization of health relief to victims of a calamity and to undertake studies and research the urgency of which has been drawn to the attention of the Board by any Member or by the Director-General.

2. The Rules of Procedure of the Executive Board can be found in *Basic documents*,¹ together with the WHO Constitution and other official documentation, and can be accessed on the Governance pages of the WHO website at <http://www.who.int/gb/bd/>.

Present membership from the European Region

3. The European Region has eight seats on the Executive Board of WHO, which from May 2017 will be filled by persons designated by France, Georgia, Italy, Kazakhstan, Malta, Netherlands, Sweden and Turkey. Four seats will become vacant in May 2018, when the terms of office of the members designated by France, Kazakhstan, Malta and Sweden will expire.

Candidatures

4. In a letter dated 9 January 2017, Member States were requested to inform the Regional Director whether they wished to submit candidatures for election at the Seventy-first World Health Assembly in May 2018.

¹ Basic documents – 48th edition. Geneva: World Health Organization; 2014.

5. It will be recalled that the Regional Committee at its 63rd session in 2013 adopted resolution EUR/RC63/R7, which prescribes the criteria for and selection of candidatures for membership of the Executive Board.

6. The following nominations were received at the Regional Office by 10 March 2017 and curricula vitae in standard format and the letters of intent are contained in pages 7 to 30.

Finland (Dr Päivi Sillanaukee)

Germany (Mr Björn Kümmel)

Israel (Dr Itamar Grotto)

Poland (Ms Barbara Katarzyna Kutryba)

Romania (Dr Alexandru Rafila)

Tajikistan (Mr Salomudin Yusufi)

Overview of membership

7. Table 1 shows those countries of the European Region that designated members of the Executive Board during the period 1993–2019.

Table 1. Executive Board of the World Health Organization – overview of memberships^a of the European Region from 1993 to 2019

Country	WHA 46 1993	WHA 47 1994	WHA 48 1995	WHA 49 1996	WHA 50 1997	WHA 51 1998	WHA 52 1999	WHA 53 2000	WHA 54 2001	WHA 55 2002	WHA 56 2003	WHA 57 2004	WHA 58 2005	WHA 59 2006	WHA 60 2007	WHA 61 2008	WHA 62 2009	WHA 63 2010	WHA 64 2011	WHA 65 2012	WHA 66 2013	WHA 67 2014	WHA 68 2015	WHA 69 2016	WHA 70 2017	WHA 71 2018	WHA 72 2019	
Albania																					X	XXX	XXX	X				
Andorra																					X	XXX	XXX	X				
Armenia																		X	XXX	XXX	X							
Austria																												
Azerbaijan													X	XXX	XXX	X					X	XXX	XXX	X				
Belarus																												
Belgium							X	XXX	XXX	X											X	XXX	XXX	X				
Bosnia and Herzegovina																												
Bulgaria	XXX	X																										
Croatia			X	XXX	XXX	X															X	XXX	XXX	X				
Cyprus ^b								X	XXX	XXX	X																	
Czech Republic												X	XXX	XXX	X													
Denmark	XXX	X												X	XXX	XXX	X											
Estonia																	X	XXX	XXX	X								
Finland		X	XXX	XXX	X																							
France	X	X	XXX	XXX	X	X	XXX	XXX	X			X	XXX	XXX	X			X	XXX	XXX	X			X	XXX	XXX	X	
Georgia																										X	XXX	XXX
Germany					X	XXX	XXX	X										X	XXX	XXX	X							
Greece	XXX	X																										
Hungary																X	XXX	XXX	X									
Iceland											X	XXX	XXX	X														
Ireland			X	XXX	XXX	X																						
Israel	X	XXX	XXX	X																								
Italy								X	XXX	XXX	X															X	XXX	XXX
Kazakhstan									X	XXX	XXX	X												X	XXX	XXX	X	
Kyrgyzstan															X	XXX	XXX	X										
Latvia																												
Lithuania								X	XXX	XXX	X										X	XXX	XXX	X				
Luxembourg												X	XXX	XXX	X													
Malta																								X	XXX	XXX	X	
Monaco																												
Montenegro																												
Netherlands					X	XXX	XXX	X																	X	XXX	XXX	X
Norway					X	XXX	XXX	X										X	XXX	XXX	X							
Poland				X	XXX	XXX	X																					
Portugal	XXX	XXX	X										X	XXX	XXX	X												

Country	WHA 46 1993	WHA 47 1994	WHA 48 1995	WHA 49 1996	WHA 50 1997	WHA 51 1998	WHA 52 1999	WHA 53 2000	WHA 54 2001	WHA 55 2002	WHA 56 2003	WHA 57 2004	WHA 58 2005	WHA 59 2006	WHA 60 2007	WHA 61 2008	WHA 62 2009	WHA 63 2010	WHA 64 2011	WHA 65 2012	WHA 66 2013	WHA 67 2014	WHA 68 2015	WHA 69 2016	WHA 70 2017	WHA 71 2018	WHA 72 2019
Republic of Moldova															X	XXX	XXX	X									
Romania												X	XXX	XXX	X												
Russian Federation ^c	X	X	XXX	XXX	X	X	XXX	XXX	X	X	XXX	XXX	X			X	XXX	XXX	X			X	XXX	XXX	X		
San Marino																											
Serbia ^d																		X	XXX	XXX	X						
Slovakia																											
Slovenia														X	XXX	XXX	X										
Spain										X	XXX	XXX	X														
Sweden									X	XXX	XXX	X											X	XXX	XXX	X	
Switzerland								X	XXX	XXX	X									X	XXX	XXX	X				
Tajikistan																											
The former Yugoslav Republic of Macedonia																											
Turkey	X	XXX	XXX	X										X	XXX	XXX	X							X	XXX	XXX	X
Turkmenistan																											
Ukraine																											
United Kingdom	XXX	XXX	X		X	XXX	XXX	X		X	XXX	XXX	X		X	XXX	XXX	X				X	XXX	XXX	X		
Uzbekistan																				X	XXX	XXX	X				

Shading indicates years prior to becoming a Member State.

^a In accordance with Rule 105 of the Rules of Procedure of the World Health Assembly, "The term of office of each Member entitled to designate a person to serve on the Board shall begin immediately after the closing of the session of the Health Assembly at which the Member concerned is elected and shall end immediately after the closing of the session of the Health Assembly during which the Member is replaced."

^b Reassigned from EMRO to EURO as per resolution WHA56.16 in May 2003.

^c Membership of the former USSR has been continued by the Russian Federation.

^d Formerly Serbia and Montenegro.

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: FINLAND

Family name SILLANAUKKEE **First/Other names** Päivi

Male/Female Female **Date of birth** 16 February 1964

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German		X	
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Specialist Degree in Public Health, University of Helsinki	2013
General Executive Master's degree in Business Administration (MBA) training, University of Tampere and Tampere University of Technology	2002
Doctor of Medicine (MD), University of Tampere	1996
Management training for Health Care, Helsinki School of Economics and Business Administration	1994
Licensed physician	1994

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Permanent Secretary, Ministry of Social Affairs and Health	2012 to date
Director General, Department of Social and Health Services, Ministry of Social Affairs and Health	2008–2012
Director, Social and Health Care Service Provision, City of Tampere	2007–2008
Deputy Mayor, City of Tampere	2004–2006
Director of health care area, Pirkanmaa hospital district	2001–2004

Experience of working for and with international organizations **Year**

Member, Advisory Group of the Towards A Safer World Network (Sendai Framework)	2015 to date
Head/member of national delegation, WHO World Health Assembly, Executive Board, Regional Committee for Europe	2008 to date
Head of delegation, Global Health Security Agenda Ministerial Meeting	2016
Head of delegation, World Bank Pandemic Financing Stakeholders' Meeting	2015
Head of delegation, United Nations General Assembly Special Session on NCDs	2014
Head of delegation, European Union Informal Meeting of Health Ministers	2012

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Member, Global Health Security Agenda Steering Group	2014–2019
Chair, Alliance for Country Assessments for Global Health Security and IHR Implementation	2016–2018
Chair, Committee for the Prevention of Gender-based and Domestic Violence	2017 to date
Chair, Steering group on social and health care reform	2015 to date
Chair, Health care sector, National Emergency Supply Agency	2012 to date
Chair, Working Group on the Government Action Plan for Gender Equality	2012 to date
Chair of Representatives, Finnish Centre for Pensions	2012 to date

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

Year

Chair, Advisory Board for Electronic Information Management in Social and Health Care	2012 to date
Chair, Advisory Board for Rehabilitation	2012–2015
Chair, Steering Group for the Cross-sectoral Action Plan for reducing social exclusion, poverty and health problems	2011–2015
Chair, Advisory Board for Public Health	2008–2015
Chair, Global Health Security Agenda Steering Group	2015
Vice-Chair, Advisory Board for Children's and Adolescents' Health and Wellbeing	2009–2013
Chair, Advisory Board on Early Childhood Education and Care	2008–2013
Chair, Steering Group for the National Development Programme for Social Welfare and Health Care	2008–2011

Name and position of person making nomination

Juha Rehula, Minister of Family Affairs and Social Services

Letter of intent

Dear Madam Regional Director,

Finland is pleased to present Dr Päivi Sillanaukee, Permanent Secretary, Ministry of Social Affairs and Health, as a candidate for a seat on the Executive Board of the World Health Organization for 2018–2021.

Finland strongly supports WHO as the lead agency for Global Health. Over decades, Finland has collaborated closely with WHO in a wide range of issues, both at the global and regional levels. Finland last served on the Executive Board in 1995–1997 and on the WHO/EURO Standing Committee in 2012–2016 (including as vice Chair and Chair). Finland has hosted many WHO meetings and conferences, the most recent ones being the 8th Global Conference on Health Promotion in 2013 and the World Conference on Injury Prevention and Safety Promotion in 2016. Finnish experts continue serving on many WHO committees, expert panels and partnerships. Currently President Tarja Halonen is co-chairing the Working Group on the Health and Human Rights of Women, Children and Adolescents. The importance Finland gives to WHO collaboration is demonstrated also by the secondment of a senior health expert from the Ministry of Social Affairs and Health to the Permanent Mission in Geneva.

Finland has championed many WHA resolutions, most recently on humanitarian emergencies (WHA65.20), health promotion (WHA67.12) and essential public health functions (WHA69.1).

Access to best attainable physical and mental health is a right. Finland takes a comprehensive approach to health and wellbeing, and stresses the need to address the economic, social and environmental determinants of health. In 2006 Finland launched the Health in All Policies initiative in order to increase the awareness of the significant impact actors outside the health sectors have on health. In delivering health for all, we emphasize the different needs of men and women, various demographic groups and persons with mental disorders, physical disabilities or other special needs. Through the ongoing epidemiological transition, noncommunicable diseases have become the main cause of death. Finland will continue its longstanding support to WHO in all aspects of the NCDs response, including strategies relating to poor nutrition, physical inactivity, tobacco and alcohol, pollution and other determinants.

The Agenda 2030 calls for Universal Health Coverage. Finland stresses the integrality of the Sustainable Development Goals and the consequent relevance of improved population health for the achievement of targets set also for many other SDGs than health. In this regard, Finland continues to encourage countries to strengthen essential public health functions and to develop comprehensive primary health service systems that are sustainably funded, staffed and managed and capable to reach the entire population. Simultaneously, attention needs to be given to the unfinished goals of promoting maternal and child health.

Efficient WHO response to emergencies requires a strong Emergency Programme, capable to collaborate with partners. Research for new medicines, vaccines and treatment protocols, combined with measures to increase access to essential medicines will need to complement policies to prevent, detect and respond to communicable diseases. Finland continues to support WHO in its work towards the full implementation of the International Health Regulations, including through promoting the One Health approach and health security capacity building.

Finland promotes a WHO that is credible, efficient, agile and transparent and delivers real impact both in its global leadership and advocacy role as well as on health outcomes. In the Executive Board Finland would support WHO to further develop mechanisms for good governance, efficiency, accountability, transparency, budgetary discipline and sustainability of financing. Focus is needed also on human resources policies and communication, as WHO competes with many other actors in Global Health.

Please accept, Madam Regional Director, the assurances of our highest consideration.

Juha Rehula
Minister of Family Affairs and Social Services

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: GERMANY

Family name KÜMMEL **First/Other names** Björn

Male/Female Male **Date of birth** 4 July 1973

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French	X	X	
German	X	X	X
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Additional qualification: international negotiations 2006

Second state examination in law 2004

MA, International Law, Cape Town, South Africa 2001

First state examination in law 2000

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Deputy Head of Unit (Policy Adviser), Global health policy WHO, G7, G20, Federal Ministry of Health (MoH) 2010–2017

Fundamental aspects of European and international health policy, MoH 2008–2010

Task Force for the German Presidency of the Council of the European Union (EU), MoH 2005–2007

Working group on global policy issues, Federal Foreign Office 2004

Federal Parliament (Bundestag), International Protocol 2000

Experience of working for and with international organizations **Year**

Participation in all sessions of the Programme, Budget and Administration Committee of the Executive Board (PBAC), the Executive Board and the World Health Assembly; national representative in PBAC and in Committees A and B of the Health Assembly 2010 to date

Participation in all sessions of the WHO Regional Committee for Europe; member of the Standing Committee of the Regional Committee (SCRC) subgroup on governance; alternate member of the SCRC 2010 to date

Organization and hosting of G7 and G20 conferences, including preparation of the German G7 and G20 presidencies at the ministerial level 2015–2017

National representative at the EU, in particular on the Social Protection Committee 2005–2009

UNHCR 2001

Cooperation with the Northern Dimension Partnership in Public Health and Social Well-being

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

Year

Head, Coordinating committee on global health with representatives of civil society	2016, 2017
Head, Working group for drafting the global health concept of the Federal Government	2013
Coordinator, Health issues, German Presidency of the Council of the EU	
Head, Interministerial coordination committee on WHO governance reform	

Name and position of person making nomination

Mr Hermann Gröhe, Federal Minister of Health

Letter of intent

Germany's nomination to the Executive Board of the World Health Organization in 2018

The top priority of Germany's global health policy is to strengthen the role of the World Health Organization (WHO) among global stakeholders as a leading and coordinating entity in global health.

Germany has highlighted this aim through its concept of global health policy. Reinforcing the role of WHO was one of the declared goals of the German presidency of the G7 summit in 2015 and of its current presidency of the G20 summit in 2017.

Germany actively supports the effectiveness of international institutions in all relevant bodies and processes, thereby promoting improved coordination and divisions of labour among the various global stakeholders.

This requires strengthening the central role of WHO as the normative and global coordinating body of the United Nations on health. WHO is the only international institution that, due to its global members, enjoys universal political legitimacy in the field of health. Germany's membership in WHO remains the central and universal point of reference for its contributions to global health.

Given a proliferation of tasks against a backdrop of scarce financial resources, WHO is facing serious challenges in global health. As a member of the Executive Board, Germany would therefore work to ensure that initiated measures of WHO reform are vigorously pursued and fully implemented. The aim is to adapt WHO so that it can meet new challenges and to strengthen its role as a high-performing, transparent, efficient, objective, independent and accountable international organization in global health, including coordinating activities in conjunction with other stakeholders at the global level.

A clear focus on WHO's core functions is crucial, as is the need to improve internal coordinating mechanisms and to strengthen WHO's governing bodies.

Through its membership on the Executive Board, Germany will intensify its efforts to increase the effectiveness of WHO's work, including through an improved budgeting process, results-oriented management, improved financial management, objective evaluation of existing measures and increased transparency.

From a German perspective, the comparative advantage of WHO lies in its special ability to set global norms and standards. We will therefore work to reinforce this core mandate of WHO. By contrast, WHO is not an original implementing organization in the area of development cooperation, as this area is occupied by a multitude of other, more specialized organizations. Consequently, we will commit to refocusing WHO towards its core mandate, including the sharing of responsibilities with other stakeholders.

Germany is a constructive and committed Member State of WHO, actively contributing to the work of WHO's governing bodies – at the global level through the World Health Assembly, the Executive Board and the Budget Committee (PBAC) and at the regional level through the Regional Committee for Europe and the Standing Committee (SCRC) – as a reliable partner for global health.

Germany's sustained political commitment to reinforcing the role of WHO at the highest political level was highlighted by the presence of Federal Chancellor Angela Merkel as a guest speaker at the World Health Assembly in 2015.

Germany strongly supports an adequate increase in WHO's regular budget and will continue to advocate for such an increase in the relevant bodies and fora. In addition, Germany, as a traditionally strong financial supporter of WHO, has in recent years further increased its financial engagement.

During its three-year membership in the Executive Board, Germany will further extend its commitment to WHO and to pursuing the priorities defined under its G7 and G20 summit presidencies. These include: continuing and deepening WHO reform; strengthening the role of WHO vis-à-vis other stakeholders in global health; more vigorous priority-setting, including a more precise definition of WHO's core mandate; continuing human resources reforms; and new initiatives to address financial challenges.

Substantive priorities include: improving the management of global health crises by way of continuing and fully implementing emergency reform; implementing the International Health Regulations; combating antibiotic resistance; supporting the work of WHO on environment and health; and assisting in polio transition planning.

In addition to these priorities, Germany, as a member of the Executive Board, will offer its long-standing expertise when the new WHO management takes up its duties, supporting the new administration at headquarters to the best of its ability.

Madam Regional Director, I have the honour to nominate Mr Björn Kummel as Germany's candidate to the Executive Board of the World Health Organization for the term 2018 to 2020. I am convinced that, in his function as the German representative, Mr Kummel's considerable experience and strong commitment would be an asset to the Organization.

Yours very truly,

Hermann Gröhe
Federal Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: ISRAEL

Family name GROTTO **First/Other names** Itamar

Male/Female Male **Date of birth** 19 October 1964

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctor of Philosophy (PhD), Department of Health Systems Management Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva 2008

Master's degree in Public Health (MPH), Braun School of Public Health, Hebrew University, Jerusalem 1999

Doctor of Medicine (MD), Sackler Medical School, Tel Aviv University, Tel Aviv 1989

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Director, Public Health Services, Ministry of Health 2007 to date

Associate Professor, Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva 2010 to date

Researcher and lecturer, Epidemiology Department, Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva 2004–2007

Head, Army Health Branch, Medical Corps, Israel Defense Forces 2001–2004

Head, Epidemiology Section, Medical Corps, Israel Defense Forces 1998–2000

Experience of working for and with international organizations **Year**

National representative, European Environment and Health Task Force 2008 to date

Research collaboration with different international study groups (see attached list of selected publications) 2005 to date

Working on polio eradication in Israel with WHO headquarters, WHO Regional Office for Europe, Independent Monitoring Board of the Polio Eradication Initiative 2013–2015

Developing public health capacities in China 2007–2012

National representative, World Health Assembly 2009, 2010, 2012

Consultant on public health systems and services, WHO Regional Office for Europe 2005

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Head, Intergovernmental committee for development of medical services in northern Israel 2015 to date

Head, National Committee for Health Promotion Initiative 2012 to date

Director, Public Health Services 2007 to date

Chair, Intergovernmental committee for support to celiac patients in Israel 2015

Chair, Intergovernmental committee to reform the inspection of meat in Israel 2010–2011

Head, National Certification Committee for Poliomyelitis Eradication 2007

Name and position of person making nomination

M.K. Yakov Litzman, Minister of Health

Selected scientific publications relevant to international collaboration

1. Barnett DJ, Balicer RD, Lucey DR, Everly GS, Omer SB, Steinhoff MC, Grotto I. A systematic analytic approach to pandemic influenza preparedness planning: an application of the Haddon matrix. *PLoS Med.* 2005;2(12):e359.
2. Berman T, Goldsmith R, Goen T, Spungen J, Novack L, Levine H, Amitai Y, Shohat T, Grotto I. Urinary concentrations of organophosphate pesticide metabolites in adults in Israel: demographic and dietary predictors. *J Env Int.* 2013;60C:183–189.
3. Grotto I, Leventhal A. Are WHO/Euro system framework functions applicable to public health services? *International Public Health Journal* 2009;1:115–118.
4. Kaliner E, Kopel E, Anis E, Mendelson E, Moran-Gilad J, Shulman LM, Singer SR, Manor Y, Somekh E, Rishpon S, Leventhal A, Rubin L, Tasher D, Honovich M, Moerman L, Shohat T, Bassal R, Sofer D, Gdalevich M, Lev B, Gamzu R, Grotto I. The Israeli public health response to wild poliovirus importation. *Lancet Infect Dis.* 2015;15:1236–1242.
5. Kopel, E, Kaliner E, Grotto I. Lessons from a public health emergency – importation of wild poliovirus to Israel. *N Engl J Med.* 2014;371:981–983.
6. Levine H, Berman T, Goldsmith R, Göen T, Spungen J, Novack L, Amitai Y, Shohat T, Grotto I. Exposure to tobacco smoke based on urinary cotinine levels among Israeli smoking and non-smoking adults: a cross-sectional analysis of the first Israeli human biomonitoring study. *BMC Pub Health.* 2013;13:1241.
7. Moran-Gilad, J, Mentasti M, Lazarovitch T, Huberman Z, Stocki, T, Sadik C, Shahar T, Anis E, Valinsky L, Harrison T, Grotto I. Molecular Epidemiology of Legionnaires' Disease in Israel. *Clin Microbiol Infect.* 2014;20(7):690–696.
8. Sloot F, Hoeve HL, de Kroon ML, Goedegebure A, Carlton J, Griffiths HJ, Simonsz HJ, EUSGREEN Study Group. Inventory of current EU paediatric vision and hearing screening programmes. *J Med Screen.* 2015;22(2):55–64.

Letter of intent

Dear Colleagues,

It is my honour as Minister of Health of the State of Israel to present to your consideration the candidacy of Professor Itamar Grotto to the Executive Board of the World Health Organization, on behalf of the Regional Office for Europe. Prof. Grotto is Associate Director General of the Ministry of Health of the State of Israel. He has vast experience in public health policies, as his former position was Director of Public Health Services at the Ministry of Health. This enriched his experience and expertise in many fields, especially universal health coverage, promoting public health and healthier lifestyle, mitigating environmental hazards as well as infectious disease surveillance and control.

The Israeli Ministry of Health and the WHO have many similarities in their priorities and agendas, including:

Health and the Environment: Israel is deeply involved in the European Environment and Health Process (EHP) addressing key environment and health challenges included in the Parma Declaration (2010), air pollution, safe drinking water, and the impact of climate change. Israel hosted the last mid-term meeting in Haifa, Israel in April 2015.

Infectious Disease Surveillance and Control: Israel has broad experience in infectious diseases outbreak preparedness and response. Israel played an important role in the global fight against Ebola through its world's largest per-capita financial contribution, sending fully equipped medical clinics, contributing anti-Ebola medications to Sierra Leone and Liberia, and sending infectious disease experts to Ethiopia and Cameroon to train local health workers to prevent further spread.

Emergency Preparedness: Israeli professionals as well as the national system have extensive experience in preparedness and response to public health emergencies. Israel consistently dispatches emergency medical teams to disaster areas around the world. In November 2016, WHO recognized Israel's expertise and capabilities and awarded Israel's EMT's and Field Hospital the highest ranking by the Organization: Type 3 classification. Israel has also continuously contributed to WHO efforts for the WHO Health Emergencies program.

Health and well-being: Israel's ministry of health is promoting a national plan for healthy, active living, focusing on the younger generation and titled with the goal of "Ending Child Obesity". Prof. Grotto is leading this campaign, creating the national policy and guiding its implementation.

Using Israeli knowledge and his own expertise, Prof. Grotto will work to promote other key priorities within WHO, such as the well-being of people with disabilities and support the research for the creation of innovative solutions to health challenges, especially with regard to Non-communicable diseases (NCDs).

Israel, as a member of the WHO European Region, is committed to promote these priorities in collaboration with other member states by leading initiatives, hosting expert meetings and seminars in Israel. We hope to achieve visible and sustainable growth in all priorities, in accordance with WHO standards and goals:

For years Israel has provided some of the best health services to both its citizens and others around the world. As a member of the executive board, Prof. Grotto will bring his experience and knowledge in global health and public policy, to WHO in order to assure the best policy recommendations, while dealing with challenging and limited resources. Believing in WHO's goal and SDG3, Israel is committed to share its knowledge and experience to all Member States to build a better, healthier future for people all over the world.

In view of the above, the Government of the State of Israel strongly believes Dr Grotto will bring significant added value to the work of the WHO Executive Board. We would therefore highly appreciate your valuable support to Dr Grotto as Member States of the Regional Office for Europe of the World Health Organization:

With high esteem,

Yours sincerely,

M.K. Yakov Litzman
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: POLAND

Family name KUTRYBA **First/Other names** Barbara Katarzyna

Male/Female Female **Date of birth** 20 July 1959

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Organizer and participant, Hand Hygiene Foundation Training Programme, WHO Regional Office for Europe 2014

Organizer and participant, International Summer Practicum on Patient Safety, European Society for Quality in Health Care, Council of Europe, Polish Society for Quality Promotion in Health Care (TPJ) 2007

Participant, Good Clinical Practice – Monitoring and Clinical Research, Kiecana, Warsaw 2004

Participant, Harvard School of Public Health, Polish–American Quality Network, Boston, United States of America 1994

MA, Faculty of Philology, Jagiellonian University, Institute of English Studies, Krakow 1987

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Head, National Centre for Quality Assessment in Health Care (NCQA) (WHO Collaborating Centre (WHO CC) for Developing Quality and Safety in Health Systems) 2006 to date

- Responsible for conducting the biennial collaborative agreement (BCA) programme between the WHO Regional Office for Europe and the Polish Minister of Health in the area of health care quality and patient safety
- Within the BCA programmes, WHO CC at NCQA focused on introducing WHO quality and safety solutions to the Polish health care system:
 - Clean Care is Safer Care
 - Surgical Checklist (implementation and adaptation to eight medical specialties)
 - Medication Reconciliation
 - Education in Patient Safety – the multidisciplinary curriculum (work in progress: BCA 2016–2017)
- Performance Assessment Tool for Quality Improvement in Hospitals (PATH): under the BCA and with Regional Office support; NCQA supported the development of the PATH system and its implementation in countries, including Poland, by acting as the International PATH Secretariat. NCQA maintains the international PATH website.

Senior Adviser, NCQA (WHO CC) 1995 to date

- Responsible for:
 - international cooperation and counselling;
 - development of accreditation programme in Poland (standards, procedure, surveyors' training);
 - active coordinator of accreditation surveys; and
 - specialist for the development of the National Reporting and Learning System

Experience of working for and with international organizations

Year

Expert and adviser, WHO	2015 to date
<ul style="list-style-type: none"> • Patient Safety Incident Reporting and Learning Systems: an expert consultation to inform the production of new WHO implementation guidelines, 15–16 December 2016, Geneva, Switzerland • WHO Global Consultation: Setting Priorities for Global Patient Safety, 26–28 September 2016, Florence, Italy • WHO Global Patient Safety Challenge on Medication Safety meeting 22–24 August 2016; Steering Board Meeting, 25 August 2016, Geneva, Switzerland • Actively contributed to organizing Sixty-ninth World Health Assembly Side Event on Addressing the Global Challenge of Medication Safety to Improve Patient Safety and Quality of Care, 25 May 2016 • WHO Global Patient Safety Challenge on Medication Safety, WHO Consultative Meeting Planning for the Global Patient Safety Challenge on Medication Safety, 19–20 April 2016, Geneva, Switzerland • Interregional consultation on patient safety incidents reporting and learning systems in Asia and Asia-Pacific. Establishing Patient Safety Incident Reporting and Learning Systems, 22–24 March 2016, Colombo, Sri Lanka • WHO Global Strategy for Improving Patient Safety: Strategic expert working group: Developing vision and strategic direction for improving patient safety and quality of care, 16–17 November 2015 • Member, WHO Global Coordination Committee of the planned Challenge on Medication Safety; WHO Patient Safety Incident Reporting and Learning Systems • WHO–European Commission project: Minimal Information Model For Patient Safety Incident Reporting and Learning (MIMPS); partner in the European validation of MIMPS; responsible, with WHO and WHO Country Office, for organizing the International consultation meeting, 12–13 May 2015, Warsaw 	
Co-leader and co-founder, European Accreditation Network (EAN)	2007 to date
European Commission	2006/2007 to date
<ul style="list-style-type: none"> • National representative/Chair, Expert Group on Patient Safety and Quality of Care of the European Commission • Expert, Platform of Experts in the Pilot project on the promotion of self-care systems in the European Union (PiSCE) • Expert, Platform of Experts in the Pilot project on Promoting Self-management for Chronic Diseases in the European Union (PROSTEP) • Country coordinator, EU-funded international projects <ul style="list-style-type: none"> - CEEQNET: Unified Central and Eastern European surveillance/monitoring system for healthcare quality and efficiency indicators - ENQual: European Research Network on Quality Management in Healthcare - MARQuIS: Methods of Assessing Response to Quality Improvement Strategies - HANDOVER: Improving the Continuity of Patient Care Through Identification and Implementation of Novel Patient Handover Processes in Europe - DUQuE: Deepening our Understanding of Quality Improvement in Europe • National contact point, European Union Network for Patient Safety and Quality of Care (PaSQ) 	
Member, European Accreditation Council, Joint Commission International	2004 to date
Council of Europe	2004–2006
<ul style="list-style-type: none"> • Expert, member of team that developed the Recommendation Rec(2006)7 of the Committee of Ministers to member states on management of patient safety and prevention of adverse events in health care (Adopted by the Committee of Ministers on 24 May 2006 at the 965th meeting of the Ministers' Deputies). Represented Poland on the European Health Committee. 	

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

Year

Vice-President and founding member, Polish Society for Quality Promotion in Health Care (TPJ); Member, European Society for Quality in Health Care (ESQH) • TPJ, founded in 1993, is the first NGO in Poland focused on the improvement of health care quality and patient safety	2014 to date
Chair, Expert Group on Patient Safety and Quality of Care of the European Commission	2007 to date
President, ESQH	2007–2011

Name and position of person making nomination

Konstanty Radziwiłł, Minister of Health

Letter of intent

Honourable Dr Zsuzsanna Jakab,

Republic of Poland became a member of the WHO in 1948 as a founding member and since that time remains highly committed to achieving the mission and goals of the Organization.

Poland would like to draw the attention of the international health community to the fact that there are great deficiencies in global health policy related to leadership in patient safety, education and training, public trust and healthcare accountability. The increasing lack of trust translates worldwide into the litigation boom contributing to the increasing antinomy between the tribes of healthcare providers and healthcare recipients. Progress in healthcare professionals and patients/families involvement remains slow. Also quality of care has not been given due recognition in global health policy. There are huge gaps between the countries in prioritizing harm reduction: risk management strategies have not been given due recognition, which is well-illustrated by the Ebola outbreak. Equally important is a need for further consideration and research on linking healthcare safety and cost effectiveness in different geographic contexts, aiming at the reduction of healthcare costs.

Poland attaches great importance to the fight with ever-growing burden of non-communicable diseases. Polish government undertakes a numerous legislative and other initiatives aimed at promoting healthy habits, including alleviating the burden of obesity and its consequences. One of our top priorities is tobacco control. Poland has fully implemented new EU's Tobacco Products Directive. We have also adopted very strict position towards e-cigarettes, banning the sale of such products via internet and their use in public spaces.

Poland sees the necessity of further promoting and strengthening universal health coverage, being the indispensable element of universal access to good quality, affordable and safe healthcare. Recently Polish government has initiated legislative changes aimed at broadening access to healthcare by changing the mode of health services financing.

Poland has always appreciated the amount of WHO work and passion that has led to the scientific and political support, and to the development of useful solutions, practical tools, guidelines and measures. Many of them have already been implemented into the Polish health system. Recently, the WHO Patient Safety Curriculum has been piloted in Polish medical schools. Poland also looks forward to the next initiatives of WHO Alliance for Patient Safety.

Poland would like to stimulate the international debate on issues of NCDs, patient safety, tobacco control and UHC. We will seek to promote solutions and practices that are cost-effective and affordable, so that they could be followed by all Member States. We aim at bridging the health gap in societies and reducing health inequalities, especially in young generation.

The above described activities generate a clear message that Poland is willing to promote and implement WHO's global vision related to NCDs and patient safety and pursue further the challenge of linking it to the implementation of Sustainable Development Goals (SDGs) and universal health coverage. Considering our commitment to making healthcare safer on the global level, Polish membership in the WHO EB would provide the high-level expertise, guidance and contribution to WHO global network.

Taking into consideration the relevance of these priorities and the fact that since 1999 Poland has not been given the opportunity to contribute to the global guidance on WHO policies within the membership of the Executive Board of the World Health Organization, I kindly ask to consider the candidature of Ms Barbara Kutryba for this honourable position.

Most of her working time has been spent on cooperating with different networks and groups and working with international organizations, including the European Commission, WHO/EURO and the WHO headquarters in Geneva, Ministries of Health of EU member States, Council of Europe and Pan-European NGOs. While leading the thirty European countries and all major NGOs related to European healthcare within the EU Patient Safety Group for more than decade, she has acquired necessary experience in working with different stakeholders and in multinational environment.

I truly believe Ms Kutryba will contribute significantly to the work of the Executive Board and the promotion of the Polish health priorities, with the benefit to all Member States, patients and their families.

Sincerely yours,

Konstanty Radziwiłł
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: ROMANIA

Family name RAFILA **First/Other names** Alexandru

Male/Female Male **Date of birth** 27 December 1961

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French	X	X	X
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken *Year*

Senior Specialist in Public Health	2008
Doctor of Philosophy (PhD) in Public Health Microbiology, University of Medicine and Pharmacy, Bucharest	2004
Specialist in Public Health	2002
Senior Specialist in Microbiology	1999
Doctor of Medicine (MD), University of Medicine and Pharmacy, Bucharest	1987

Professional career: list current post first, followed by up to four most important positions held *Year (start/end)*

Adviser to the Minister of Health (Health Policies)	2014 to date
Head, Microbiology Department, National Institute of Infectious Diseases	2013 to date
	2006–2012
President, Romanian Society of Microbiology	2013 to date
Professor of Microbiology, University of Medicine and Pharmacy, Bucharest	2005 to date
Secretary of State, Ministry of Health (Public Health, Health Care, Pharmaceuticals)	2012–2013
Adviser to the Minister of Health for Health Policies and HR	2008–2009
Director, Public Health Institute	2004–2006
General Director for Public Health, Ministry of Health	2001–2004

Experience of working for and with international organizations *Year*

Member, Standing Committee of the WHO Regional Committee for Europe (SCRC)	2014–2017
Member, European Union Health Security Committee	2012–2014
Member, Management Board, European Centre for Disease Prevention and Control	2009–2014
Adviser for WHO on several missions: immunization, communicable diseases, tuberculosis	2002–2011
Adviser for NATO on several missions: bioterrorism, public health	1998–2008

Experience of acting as Chairperson of high-level political and technical committees at national and/or international

Chair, Advisory Committee for Microbiology (Ministry of Health)	2016 to date
Chair, National Committee for Polio Eradication	2014 to date
Member, SCRC subgroup on migration and health	2014 to date
Member of delegation, World Health Assembly	2012–2016 2009 2002–2003
Member of delegation, WHO Regional Committee for Europe	2012–2016 2009 2001–2003
Vice-chair, National Committee for Vaccination	2008–2015
Chair, Country Coordinating Mechanism (CCM) for Global Fund in Romania	2012–2014
Secretary of State, Ministry of Health (Public Health, Health Care, Pharmaceuticals)	2012–2013
Vice-chair, CCM for Global Fund in Romania	2003–2005
Coordinator, PHARE project: Improvement of the efficiency of the Romanian system for epidemiological surveillance and control of communicable diseases	2002–2005
Head of delegation, World Health Assembly	2004
Head of delegation, WHO Regional Committee for Europe	
Member, European Commission High-level Committee on Health	2002–2004
General Director for Public Health, Ministry of Health	2001–2004

Name and position of person making nomination

Florian Bodog, Minister of Health

Letter of intent

Nomination of Dr Alexandru Rafila for the Executive Board of WHO

As a founder member of the World Health Organization (WHO), Romania actively collaborated with the organization at regional and global level, even before 1990. Without concluding the list, the following common activities should be mentioned: the European Conference of Health Planning (Bucharest, 1972), the International Course for Management of Health Services (Bucharest-Sibiu, 1973–1974). WHO established also the Collaborating Center for primary health care (Bucharest) and the WHO Collaborating Center for oral health (Iasi). Later, relevant activities, as programs on water and air pollution, children's health about water quality were developed in partnership with WHO. These programs were extremely useful, enabling improvement in the methods of investigation of the impact of environmental pollution on health and better knowledge of the problem.

The recognition of the important role and capacity of WHO to support public health systems was the reason for the support request made by the Government of Romania in December 1989, when the revolution was still in progress. Therefore, WHO soon opened in Bucharest its first WHO Liaison Office in 1991.

After 1990 the collaboration between Romania and WHO became intense, WHO being the main partner of Romania in the field of public health and healthcare reform from early 1990s. In 2005, Romania hosted the 55th Regional Committee for Europe as recognition of the excellent partnership and support offered by WHO to Romanian government. Professor Alexandru Rafila played an important role as head or member of the Romanian delegation to RC (2001–2004), for the preparation and the organization of the RC in Bucharest.

Ministerial Conference on Environment and Health (Haifa 2015), where Romania was represented by Professor Rafila, was followed at the regional level by important events, one hosted by Romanian Presidency in 2016, focused on Integrated Environment and Health Impact Assessment, which underlined the interest of our country in one of the most sensitive topics at regional level.

Essential public health programs for Romania benefit from the technical assistance of WHO. Tuberculosis and MDR-TB is the most recent example, the National Strategy being approved by Government Decision. Development and concrete results of this strategy have been directly supported by Professor Rafila, as an expert and government official.

With direct support (specialists, supplies, logistics and funds) or by involving governmental or non-governmental organizations, WHO and the Government of Romania in the past 25 years has shown real capacities of joint interventions to the new conditions of health threats. Romania has been partner of WHO for many years and has contributed substantially to policy development and implementation in key areas, as emergency preparedness, HIV/AIDS and influenza surveillance. Romanian expertise was then offered to other countries through WHO coordination. It should be also noticed that our country has supported WHO African Region and WHO Eastern Mediterranean Region, receiving for training several young doctors to improve health capacities in their member countries.

Romania considers the EB role as decisive for WHO mission as the leading world health agency, whose task is to identify main health threats, to monitor evolutions of health indicators and to promote strategies and actions needed to improve the current situation and to reach the Health 2020 and Sustainable Development Goals.

Knowledge and involvement of Professor Dr Alexandru Rafila in activities for control of the avian influenza outbreak in 2005, as well as his later contribution to pandemic preparedness plans and, in 2015–2016, to the National Tuberculosis Control Program, may place Romania as contributor to some of the most important priorities at global level.

We consider that election of the Romanian representative as member of the EB to be an asset, both for WHO and for Regional Office for Europe, due to key role Romania plays as a bridge between EU and others countries of the Region and to the experience of our candidate, Professor Alexandru Rafila as a member of the ECDC Management Board and the SCRC for Europe.

Florian Bodog
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE EXECUTIVE BOARD OF WHO

CURRICULUM VITAE

Member State making nomination: TAJIKISTAN

Family name YUSUFI **First/Other names** Salomudin

Male/Female Male **Date of birth** 26 June 1968

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X		
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken **Year**

Fellow (academician), Academy of Medical Sciences 2014

Associate, Academy of Medical Sciences 2010

Master's degree in Public Health Management, Tajik Institute of Post-Graduate Training for Medical Staff, Ministry of Health, Dushanbe 2007–2009

Professor of pharmaceutical sciences, Assessment and Certification Committee in Research and Education, Astana, Kazakhstan 2005

Doctoral candidate in Technical Sciences, Higher Certification Committee, Moscow, Russian Federation 1998

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Head, Department of Medical and Pharmaceutical Education, Human Resources and Science, Ministry of Health and Social Protection 2008–2015

Dean, Pharmaceutical Faculty, Ambuali Ibn Sino State Medical University 2005–2008

Head, Department of Pharmacy and Medical Products, Ministry of Health 2002–2005

Chairperson, Committee for the Development of the Pharmaceutical Industry, Ministry of Health 1996–2002

Department Head, Quality Control of Medicines and Medical Products, Ministry of Health 1995–1996

Experience of working for and with international organizations **Year**

Local expert, WHO Regional Office for Europe, Project for strengthening the pharmaceutical sector in Tajikistan 1999–2005

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Chairperson, Technical Working Group, Implementation of the National Health Strategy, 2010–2020 2010 to date

Chairperson, Editorial and Publication Committee, Ministry of Health and Social Protection 2009 to date

Chairperson, Pharmacopoeial Committee, Ministry of Health and Social Protection 2005 to date

Name and position of person making nomination

Olimzoda Nasim Khoja, Minister of Health and Social Protection

Letter of intent

The World Health Organization is the leading United Nations technical agency responsible for health issues in Tajikistan. WHO has been present in the country since 1992. Since then, the Government of Tajikistan, the Ministry of Health and WHO have established a fruitful cooperation in addressing major health issues. Substantial technical and financial support to act on major health problems, as well as to reform the health system, has been provided. Historically, WHO and the Ministry of Health and Social Protection have cooperated closely to develop key policy documents and implement major reforms in the health system.

The Republic of Tajikistan, along with 192 other nations, is a Member State of WHO. In addition to other activities, our country contributes to the Organization's work by participating in the annual sessions of the World Health Assembly in Geneva, making decisions regarding policy and budget. In May 2016, the Tajik ministerial delegation took part in the Sixty-ninth World Health Assembly, addressing such issues as mechanisms for coordinating the implementation of the national health strategy for 2010–2020 by the health sector; joint annual reviews and health summits in Tajikistan; and ratification of the WHO Framework Convention on Tobacco Control by the Tajik Parliament.

WHO and the Government of Tajikistan are committed to improving public health in accordance with the biennial collaborative agreements (BCAs) signed between the Ministry of Health and Social Protection and the WHO Regional Office for Europe every two years.

To facilitate planning and setting priorities for the cooperation between WHO and the Ministry of Health, a working meeting for Ministry of Health officials and the staff of the WHO Country Office in Tajikistan was held on 18 April 2014. During the meeting, participants discussed terms and the schedule for planning WHO activities for 2016–2017, as well as strategic directions for the health sector reform that were identified during the recent Joint annual review of the National health strategy of Tajikistan for 2010–2020. Participants identified priority areas for collaboration between Tajikistan and WHO in five technical categories of work: communicable diseases, noncommunicable diseases, health promotion throughout the life-course, health systems, and preparedness, surveillance and response.

The meeting resulted in a consensus on prioritizing the following programme areas:

- Communicable diseases
 - Tuberculosis
 - Vaccine preventable diseases
- Noncommunicable diseases
 - Disability and rehabilitation
- Promoting health through the life-course
 - Reproductive health, and maternal, infant, child and adolescent health
 - Social determinants of health
 - Environment and Health
- Health systems
 - National health-care policies, strategies and plans
 - Complex social health services
- Preparedness, surveillance and response
 - Possibilities for warnings and response measures
 - Managing risks in crisis and emergency situations

In 2016, Tajikistan became a member of the Standing Committee of the Regional Committee for Europe (SCRC). It actively participates in its sessions and discussions.

In view of the above, Tajikistan is willing to expand its role in the governing bodies, and therefore nominates candidates both for the Executive Board of WHO and for the Policy and Coordination Committee of the Special Programme of Research, Development and Research Training in Human Reproduction.

As a member of the SCRC, Tajikistan will promote the implementation of the Regional Committee's policy decisions across the Region, both in Tajikistan and in other Member States, sharing experience and providing advice. Also, Tajikistan will continue to contribute to the Standing Committee's meetings in both setting and implementing its decisions.

II. Standing Committee of the Regional Committee for Europe

Functions

8. Rule 14.2.10 of the Rules of Procedure of the Regional Committee for Europe stipulates that the functions of the Standing Committee of the Regional Committee shall be:

- (a) to act for and represent the Regional Committee and to ensure that effect is given to the decisions and policies of the Regional Committee, especially with regard to its supervisory functions as per Article 50 (b) of the WHO Constitution;
- (b) to advise the Regional Committee on questions referred to it by that body, and to counsel the Regional Director as and when appropriate between sessions of the Regional Committee;
- (c) to submit advice or proposals to the Regional Committee and to the Regional Director on its own initiative;
- (d) to propose items for the agenda of meetings of the Regional Committee;
- (e) to submit to the Regional Committee for consideration and approval the regional component of WHO's general programme of work;
- (f) to perform any other functions entrusted to it by the Regional Committee;
- (g) to report to the Regional Committee on its work;
- (h) to examine credentials of delegates of Members, by establishing a subdivision of three members, and report thereon to the Regional Committee.

9. Further information can be found in the Rules of Procedure of the Regional Committee for Europe and of the Standing Committee of the Regional Committee for Europe,² which are accessible on the Governance pages of the Regional Office for Europe's website at <http://www.euro.who.int/en/about-us/governance/rules-of-procedure-of-the-regional-committee-for-europe-and-of-the-standing-committee-of-the-regional-committee-for-europe>.

Present membership

10. In Rule 14.2.1 of its Rules of Procedure, the Regional Committee agreed, when electing the membership of the Standing Committee, to take into account the need for equitable geographical distribution, adequate representation of the interests of the Region, the opportunity for all Member States of the Region to participate over time in the work of the Standing Committee and other considerations relevant to maximizing the effectiveness of its work.

11. The terms of office of members from Germany, Portugal, Romania and Turkmenistan will expire at the 67th session of the Regional Committee in September 2017. The Regional Committee will therefore be requested to elect four new members of the Standing Committee, each having a three-year term of office, from September 2017 to September 2020.

² Rules of procedure of the Regional Committee for Europe and of the Standing Committee of the Regional Committee for Europe. Copenhagen: WHO Regional Office for Europe; 2015.

12. The terms of office of the remaining eight members will continue as follows:
- | | |
|--|-----------------------------|
| Georgia (Professor Amiran Gamkrelidze) | Member until September 2018 |
| Iceland (Dr Sveinn Magnússon) | Member until September 2018 |
| Italy (Dr Raniero Guerra) | Member until September 2018 |
| Tajikistan (Dr Salomudin Yusufi) | Member until September 2018 |
| | |
| Greece (Mr Ioannis Baskozos) | Member until September 2019 |
| Slovakia (Dr Mario Mikloši) | Member until September 2019 |
| Slovenia (Dr Vesna-Kerstin Petrič) | Member until September 2019 |
| Turkey (Dr Hakki Gürsöz) | Member until September 2019 |

13. It will be recalled that the Twenty-fifth Standing Committee of the Regional Committee for Europe shall consist of the Deputy Executive President of the 67th session of the Regional Committee as ex-officio Chairperson from September 2017 to September 2018 and the representatives of Member States of the Region duly elected by the Regional Committee to serve on the Standing Committee.

Nominations

14. The following nominations were received at the Regional Office by 10 March 2017 or by the extended deadline of 28 April 2017, and curricula vitae in standard format and the letters of intent are contained in pages 35 to 61.

- Croatia (Dr Iva Pejnović Franelić)
- Denmark (Dr Søren Brostrøm)
- Hungary (Ms Hanna Páva)
- Israel (Dr Itamar Grotto)
- Lithuania (Dr Mindaugas Štelemėkas)
- Poland (Ms Katarzyna Karolina Rutkowska)
- Russian Federation (Dr Lyalya Adygamovna Gabbasova)
- Uzbekistan (Mr Abdunomon Ergashevich Sidikov)

Overview of membership

15. Table 2 gives an overview of those countries of the European Region that have provided members of the Standing Committee since 2006, and Table 3 shows Committee office holders from 1994 to the present.

Table 2. Standing Committee of the Regional Committee for Europe – overview of membership^a from September 2006 to September 2018

Countries	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Albania													
Andorra			X	XXX	XXX	X							
Armenia													
Austria	X						X	XXX	XXX	X			
Azerbaijan				X	XXX	XXX	X						
Belarus								X	XXX	XXX	X		
Belgium						X	XXX	XXX	X				
Bosnia and Herzegovina													
Bulgaria					X	XXX	XXX	XXX	X				
Croatia					X	XXX	XXX	X					
Cyprus													
Czech Republic													
Denmark	X												
Estonia	XXX	X						X	XXX	XXX	X		
Finland							X	XXX	XXX	X			
France								X	XXX	XXX	X		
Georgia	X	XXX	XXX	X						X	XXX	XXX	X
Germany									X	XXX	XXX	X	
Greece											X	XXX	XXX
Hungary	XXX	X											
Iceland										X	XXX	XXX	X
Ireland													
Israel							X	XXX	XXX	X			
Italy	XXX	XXX	X							X	XXX	XXX	X
Kazakhstan													
Kyrgyzstan	X	XXX	XXX	X									
Latvia								X	XXX	XXX	X		
Lithuania			X	XXX	XXX	X							
Luxembourg													
Malta						X	XXX	XXX	X				
Monaco													
Montenegro			X	XXX	XXX	X							
Netherlands	XXX	XXX	X										
Norway	X	XXX	XXX	X									
Poland					X	XXX	XXX	X					
Portugal									X	XXX	XXX	X	
Republic of Moldova							X	XXX	XXX	X			
Romania									X	XXX	XXX	X	
Russian Federation						X	XXX	XXX	X				
San Marino													
Serbia ^b	XXX	XXX	X										
Slovakia		X	XXX	XXX	X						X	XXX	XXX
Slovenia											X	XXX	XXX
Spain					X	XXX	X						
Sweden				X	XXX	XXX	X						
Switzerland		X	XXX	XXX	X								
Tajikistan										X	XXX	XXX	X
The former Yugoslav Republic of Macedonia		X	XXX	XXX	X								
Turkey					X	XXX	XXX	X			X	XXX	XXX
Turkmenistan									X	XXX	XXX	X	
Ukraine				X	XXX	XXX	X						
United Kingdom	XXX	X			X	XXX	XXX	X					
Uzbekistan	X												

^a For the purpose of this table, each term of office of a member of the Standing Committee starts with the session of the Regional Committee in the year in which the member is elected and ends at the Regional Committee of the year indicated.

^b Formerly Serbia and Montenegro.

Table 3. Office holders of the Standing Committee of the Regional Committee for Europe from 1994 to 2017

Term (from one session of the Regional Committee to the next session)	Chairperson (Deputy Executive President of the Regional Committee as member ex-officio)	Vice-Chairperson
1994–1995	Dr Niall Tierney, Ireland	Dr Anthony Vassallo, Malta
1995–1996	Professor Jean-François Girard, France	Dr Mikhail N. Saveliev, Russian Federation
1996–1997	Dr Marta di Gennaro, Italy	Professor Vilius J. Grabauskas, Lithuania
1997–1998	Professor Vilius J. Grabauskas, Lithuania	Dr Jeremy M. Metters, United Kingdom
1998–1999	Dr Danielle Hansen-Koenig, Luxembourg	Dr Jeremy M. Metters, United Kingdom
1999–2000	Dr Jeremy M. Metters, United Kingdom	Professor Ayşe Akin, Turkey
2000–2001	Professor Ayşe Akin, Turkey	Professor Frantisek Kölbl, Czech Republic
2001–2002	Dr James Kiely, Ireland	Dr Jacek Antoni Piatkiewicz, Poland (<i>first and second sessions</i>) Dr Alamhon Akhmedov, Tajikistan (<i>third, fourth, fifth and sixth sessions</i>)
2002–2003	Dr Jarkko Eskola, Finland	Dr Božidar Voljč, Slovenia
2003–2004	Dr Božidar Voljč, Slovenia	Dr Godfried Thiers, Belgium
2004–2005	Dr Godfried Thiers, Belgium	Dr Jens Kristian Gøtrik, Denmark
2005–2006	Dr Jens Kristian Gøtrik, Denmark	Dr Hubert Hrabcik, Austria Dr David Harper, United Kingdom
2006–2007	Dr David Harper, United Kingdom	Ms Annemiek van Bolhuis, Netherlands
2007–2008	Ms Annemiek van Bolhuis, Netherlands	Dr Bjørn-Inge Larsen, Norway
2008–2009	Dr Bjørn-Inge Larsen, Norway	Dr Vladimir Lazarevik, the former Yugoslav Republic of Macedonia
2009–2010	Dr Vladimir Lazarevik, the former Yugoslav Republic of Macedonia	Dr Josep Casals Alís, Andorra
2010–2011	Dr Josep Casals Alís, Andorra	Dr Lars-Erik Holm, Sweden
2011–2012	Dr Lars-Erik Holm, Sweden	Ms Dessislava Dimitrova, Bulgaria
2012–2013	Dr Daniel Reynders, Belgium	Dr Raymond Busuttil, Malta
2013–2014	Dr Raymond Busuttil, Malta	Ms Taru Koivisto, Finland
2014–2015	Ms Taru Koivisto, Finland	Professor Benoît Vallet, France
2015–2016	Professor Benoît Vallet, France	Ms Dagmar Reitenbach, Germany
2016–2017	Ms Dagmar Reitenbach, Germany	Professor Amiran Gamkrelidze, Georgia

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: CROATIA

Family name PEJNOVIĆ FRANELIĆ **First/Other names** Iva

Male/Female Female **Date of birth** 9 February 1974

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German	X	X	X
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctor of Philosophy (PhD), Biomedicine and Health, University of Zagreb Medical School,
Public Health and Health Care 2013

Specialization in School Medicine 2005

Doctor of Medicine (MD), Medical School, University of Zagreb 1998

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Head, Department for International Cooperation, Directorate, Croatian Institute
of Public Health 2016 to date

Head, Department for Mental Health Promotion and Addiction Prevention with
Counselling Centre, Health Promotion Service, Croatian Institute of Public Health 2013–2016

Head, Department for Monitoring Health Needs of School Children and Adolescents,
School and Adolescent Medicine and Addiction Prevention Service, Croatian Institute
of Public Health 2007–2013

Head, Unit for Monitoring and Research of Health Indicators, School Medicine Service,
Croatian Institute of Public Health 2006–2007

Experience of working for and with international organizations **Year**

Member of research team, WHO European Childhood Obesity Surveillance Initiative 2015 to date

Member, Committee on National Alcohol Policy and Action, European Commission (EC) 2014 to date

WHO National Alcohol Focal Point for Alcohol Policy 2013 to date

Member of research team, European School Survey Project on Alcohol and Other Drugs
(ESPAD), ESPAD Group, European Monitoring Centre for Drugs and Drug Addiction,
Council of Europe Pompidou Group, Swedish Council for Information on Alcohol and
other Drugs 2003 to date

Member of research team, Health Behaviour in School-aged Children, WHO 2002 to date

Principal investigator, ESPAD Group, European Monitoring Centre for Drugs and Drug
Addiction, Council of Europe Pompidou Group, Swedish Council for Information on
Alcohol and other Drugs 2014–2017

Experience of working for and with international organizations	Year
National coordinator, European Network of Health Promoting Schools/Schools for Health in Europe, WHO, Council of Europe, EC	2013–2017
Meeting representative, Working Party for Public Health at Senior Level, Council of the European Union (EU)	2017
Member of national delegation, 66th session of the WHO Regional Committee for Europe	2016
Meeting representative, Working Party for Public Health, Council of the EU	2013
Member of national delegation, 56th session of the United Nations Commission on Narcotic Drugs	2013
National coordinator, European Member States Network Nutrition-Friendly Schools Initiative	2011

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level	Year
Member, Expert Council of the Office for Combating Drug Abuse, Republic of Croatia	2015 to date
President, Intersectoral committee for reducing alcohol-related harm, Ministry of Health	2014 to date
Member, National committee for fighting against smoking	2012 to date

Name and position of person making nomination

Professor Milan Kujundžić, MD, PhD, Minister of Health

Letter of intent

Dear Dr Jakab,

We are pleased to present your with Croatia's intention to put forward its candidacy for the Standing Committee of the Regional Committee for Europe (SCRC).

1. Relations between Croatia and the WHO European Region

The World Health Organization and Croatia have had a long history of cooperation in the area of international, global health, which began with the establishment of the Organization and the Croatian physician Andrija Štampar who was a leading public health expert, also known as the reformer of public health in Croatia. It is a well-known fact today that health is a fundamental human right and that it cannot be achieved by investing in the health area by an individual country or region, but that it should incite necessary changes in the educational and social sector, as well as in other sectors, through various partnerships and cooperation. From the outset, Croatia has been fully committed to achieving the WHO goals with Croatian experts continuously providing support to the WHO European Office in its technical work and activities. The leading cause of morbidity and premature mortality in Croatia are non-communicable diseases, particularly cardiovascular diseases, cancer and injuries. Due to common risk factors such as unhealthy diet, insufficient physical activity, smoking and alcohol consumption, in the recent years Croatia has introduced the national program for healthy living and national screening programmes for breast, colorectal and cervical cancers. A successful intersectoral collaboration on these issues has been established, taking into account the life course approach, with the emphasis on the empowerment of individuals and patients to take control over their health and health in all policies approach.

Since Croatia will take over the Presidency of the Council of the European Union in 2020, we would like to further develop and upgrade our excellent cooperation with the WHO in achieving common health goals and priorities.

The Croatian candidature to the SCRC would provide us with the unique opportunity to have health related issues become a centre piece of the national and global agenda.

2. Croatia as a future possible member of the WHO Regional Office SCRC

Priorities of relevance to Croatia:

- Sustainable development goals of the 2030 Agenda
- Intersectoral collaboration in NCD control
- Implementation of FCTC
- Health emergencies
- Antimicrobial resistance
- Sustainable health systems and health workforce
- Refugee and migrant health challenges
- Environment and health

3. Croatian role in achieving the priorities and reasons for applying

With regard to finding workable solutions to the challenges that the European Region is facing nowadays, Croatia could significantly contribute with its experience in applying the social medical concept of equal health protection, its vast experience in dealing with the challenges of the last post-war period, including refugees and migrants, and the experience gained from the socio-economic and political transition. All these elements impact inequalities in health, and that is why we believe that our experience could improve the implementation of the health agenda and provide a concrete support to other countries in the Region facing similar challenges.

With its knowledge and expertise, especially in the challenging and demanding fields such as tobacco, alcohol and drug control, HIV/AIDS, TB, refugees and migrant health, health emergencies, sustainable health systems and health workforce, Croatia gives its unreserved support to the Secretariat in implementing the adopted decisions.

Upon taking over the Presidency of the Council of the European Union in 2020, Croatia would be pleased to further strengthen and upgrade the so far fruitful cooperation with the WHO.

We find the close collaboration with other UN agencies and bodies, as well as horizontal linkages on the common issues, crucial in putting health onto the foreign policy agenda and we firmly believe that the WHO will remain the keeper of global public health.

Dear Regional Director, please accept the assurances of my highest consideration.

Professor Milan Kujundžić, MD, PhD
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: DENMARK

Family name BROSTRØM **First/Other names** Søren

Male/Female Male **Date of birth** 4 June 1965

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Master's degree in Public Administration, Copenhagen Business School	2011
Specialist in obstetrics and gynaecology, Danish Health Authority	2007
Doctor of Philosophy (PhD), Faculty of Health Sciences, University of Copenhagen	2003
Doctor of Medicine (MD), University of Copenhagen	1995

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Director General, Danish Health Authority	2015 to date
Director, Hospital Services & Emergency Management, Danish Health Authority	2011–2015
Associate Professor, Department of Obstetrics and Gynaecology, Faculty of Health Sciences, University of Copenhagen	2007–2011
Senior Consultant, Herlev Hospital	2009–2011

Experience of working for and with international organizations **Year**

Secretary-General, International Urogynaecology Association (IUGA)	2010–2011
President, Nordic Urogynaecology Association (NUGA)	2008–2011
Board Member, European Board and College of Obstetrics and Gynaecology (EBCOG)	2003–2006
President, European Network of Trainees in Obstetrics and Gynaecology (ENTOG)	2003–2005
President, Danish Association of Trainees in Obstetrics and Gynaecology (FYGO)	2001–2003

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

Year

Chair, National Council for Specialist Nursing Education	2017 to date
Chair, National Council for Medical Specialist Education	2016 to date
Chair, National Advisory Committee for Cancer	2014 to date
Chair, National Hospital Planning Committee	2014 to date
Chair, National Task Force for Cancer and Heart Disease	2014 to date
Chair, National Task Force for Mental Health	2014 to date
Chair, National Advisory Committee for Pandemic Influenza and other epidemics	2014 to date
Chair, National Advisory Committee for Cardiovascular Disease	2013–2016
Chair, National Advisory Committee for Mental Health	2013–2016
Chair, National Committee for Screening Programmes	2013–2015
Chair, National Committee for Childhood Immunization Programmes	2011–2015

Name and position of person making nomination

Ms Karen Ellemann, Minister for Health

Letter of intent

The Government of Denmark has a longstanding and devoted partnership with the World Health Organization (WHO).

The Danish Government is honoured to host the WHO Regional Office for Europe and highly values the close cooperation with the Office in important areas such as noncommunicable diseases, vaccines and immunization, the International Health Regulations and healthy ageing.

Furthermore, Denmark contributes with several WHO collaborating centres that support the surveillance and control of targeted diseases such as HIV and viral hepatitis as well as antimicrobial resistance.

Denmark last served on the Standing Committee of the Regional Committee (SCRC) from 2003–2006 and was a member of the Executive Board (EB) from 2006–2009.

Health 2020 and the Sustainable Development Goals (SDGs)

Denmark will bring attention to the final stage of the implementation of the Health 2020 policy framework and the importance of implementing the 2030 Agenda for Sustainable Development in the WHO European Region. In the coming years, new regional priorities should be defined in line with the Region's respective policies, notably the Health 2020 framework.

Denmark stays committed to promoting the goals of Health 2020, for example, to reduce health inequalities, strengthen public health and ensure people-centred health systems that are universal, equitable, sustainable and of high quality.

WHO Reform

WHO reform remains of critical importance. The European Region has undergone an extensive reform process and a continued effort is required to ensure that WHO is ready to address the increasingly complex challenges of health.

The Danish Government supports the work carried out by the Regional Office in this regard and a Danish membership of the SCRC will contribute to further progress in essential areas, such as health emergency management, WHO's engagement with non-State actors and managerial reforms.

Vaccines and immunization

The European Vaccine Action Plan 2015–2020 (EVAP) and national vaccination programmes are imperative in order for the Region to achieve the targets of global immunization. This requires the continuous attention of WHO. Denmark supports the work of the Regional Office to address declining vaccine coverage and will put further emphasis on ensuring good and reliable data on vaccine coverage as well as on the occurrence of vaccine-preventable diseases.

Noncommunicable diseases (NCDs)

Of the six WHO regions, the European Region is the most affected by NCDs and Denmark will support the Regional Office in developing norms and standards, guidance and public health tools to help Member States in the Region implement the new European Action Plan for NCDs.

Antimicrobial resistance

AMR is one of the greatest threats to global health today. Strong, integrated surveillance of antibiotic use and development of AMR in all sectors is of the utmost importance. Denmark stays committed to the important work of the Regional Office in this regard and supports the call for a One Health approach. Furthermore, Denmark will work to ensure prudent use of antibiotics in the Region.

Integrating gender equity and human rights

Denmark will support the Regional Office in the implementation of the new European action plan for sexual and reproductive health and rights in the WHO European Region 2017–2021. Synergies with other relevant programmes should be achieved by providing integrated policies and packages of interventions in maternal, new-born, child and adolescent health as well as by developing evidence-based norms, standards and tools for scaling up equitable access to quality care services within a rights and gender-based framework.

By pursuing the above-mentioned priorities the Government of Denmark intends to advance on a broad range of health issues with the aim of improving health and well-being for all in the WHO European Region.

Yours sincerely,

Karen Ellemann
Minister for Health

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: HUNGARY

Family name PÁVA **First/Other names** Hanna

Male/Female Female **Date of birth** 12 May 1962

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Specialization in European law	2000
Specialization in intellectual property rights' law	1989
Specialization in civil and public administration law	1988
Master's degree in science of law	1985

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Deputy Director-General, National Health Care Service Centre	2017 to date
President, Health Registration and Training Centre	2015–2016
Deputy Secretary of State, Ministry of Human Capacities, State Secretariat for Health	2010–2015
President, Office for Health Authorization	2003–2008
Deputy Secretary of State, Ministry of Health	2000–2002

Experience of working for and with international organizations **Year**

Head or member of delegation, WHO Regional Committee for Europe	2010–2016
Head or member of delegation, World Health Assembly	2010–2016
Alternate member, Executive Board (EB) of WHO	2010–2011
Head of delegation at EB and Health Assembly meetings during Hungarian Presidency of the Council of the European Union (EU)	2011
Member, Management Board, European Centre for Disease Prevention and Control	2011
Member, Hungarian delegation during negotiations on Hungary's accession to the EU	1998–2004

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Co-President, Hungarian–Russian Mixed Committee on Health	2010–2015
Co-President, Hungarian–Slovakian Mixed Committee on Health	2010–2015
Member, National Board Against Counterfeiting (special attention to counterfeiting medicines)	2010–2015

Name and position of person making nomination

Zoltán Balog, Minister of Human Capacities

Letter of intent

In Hungary, noncommunicable diseases are the main contributors to morbidity and premature mortality, primarily being attributable to lifestyle factors: smoking, alcohol consumption, unhealthy diet, lack of physical activity. To address these challenges, the Government introduced innovative measures aimed at improving the health status and, at the same time, increasing resources available for the health sector. These measures, shaped in collaboration with WHO Europe, included the introduction of Public Health Product Tax levied on food stuffs based on their sugar, salt and methylxantine content; the legislation on maximum tolerable level of trans-fatty acids in foodstuffs, and on nutritional health aspects of public catering. To promote physical activity, our primary and secondary schools' students have daily physical education classes.

An overall national health strategy: "Healthy Hungary 2014–2020" was approved by Government. Related to the strategy, further specific action plans and programmes have been elaborated and are under discussion on TB, nutrition, HIV/AIDS, mental health and chronic care management. The strategy takes a comprehensive and integrated approach to non-communicable disease prevention and control, through health systems strengthening and addressing social determinants of health, paying special attention to health promotion, strengthening primary care and rationalising patient pathways. To support planned interventions, a report on social determinants of health/health inequities was prepared, in cooperation with different stakeholders, as an example for evidence-informed policy making. Hungary is actively participating in the EVIPNET. The health system performance assessment framework has also been institutionalised, enhancing implementation of the Tallinn Charter and Health 2020 as well.

The outflow of health professionals is of increasing concern for us. We can only be successful, if we have well-trained, motivated health professionals, pursuing their profession in our country. Hungary is open to all forms of common thinking as regards the health workforce, with special emphasis on professional mobility. In 2015 the Health Services Management Training Centre of Semmelweis University, Budapest was designated as a WHO Collaborating Centre on Human Resources for Health Development. The Hungarian nominee has first-hand experience in human resources for health management issues.

Hungary strongly supports all endeavours of WHO European Region to enhance the implementation of FCTC. The Government is devoted to achieve tangible results in tobacco control. Main measures introduced by us comprise: ban or essential restrictions on smoking in indoor and certain outdoor public places, the mandatory use of combined health warnings, and restrictions on the sale of tobacco products, consideration of plain packaging. In 2014, Hungary organised the European regional meeting on the implementation of the FCTC. Dr Páva represented Hungary in several meetings including CoP, and has overall knowledge in this area.

During recent years, a number of coordinated, intersectoral strategies, programmes have been formed and implemented reflecting the intersectoral and life course approach taken by the WHO: programmes on mother and child health; health promotion and disease prevention in all ages with particular focus on infant and school health programmes; addressing health determinants, with special emphasis on adolescents; further developing early childhood interventions to enhance integration, inclusion as early as possible.

Last but not least, Hungary is looking forward to hosting the 67th Regional Committee in Budapest in September 2017. We are open to cooperating with all relevant bodies for a successful meeting. Since 2016 as a special observer Dr Páva has been taking part in the work of the SCRC and she has been involved in the preparation of the RC meeting.

Hungary sees SCRC as a body supporting WHO to fulfil its mission as the leading international health agency by identifying areas, topics to be addressed, providing advice and guidance how to approach them while remaining focused, technical, result driven.

Hungary has been an active WHO partner for several years. In order to further strengthen this cooperation it is my honour to forward the nomination of Dr Hanna Páva to the Standing Committee of the Regional Committee for Europe.

Since 2010, Dr Páva has regularly participated in WHO meetings, conferences, governing body sessions, World Health Assemblies and Regional Committee meetings gaining overall knowledge on health topics and insight into the processes and procedures which together with her special fields of interest and experience make her a suitable, dedicated candidate.

Yours sincerely,

Zoltán Balog

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: ISRAEL

Family name GROTTO **First/Other names** Itamar

Male/Female Male **Date of birth** 19 October 1964

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctor of Philosophy (PhD), Department of Health Systems Management Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva	2008
Master's degree in Public Health (MPH), Braun School of Public Health, Hebrew University, Jerusalem	1999
Doctor of Medicine (MD), Sackler Medical School, Tel Aviv University, Tel Aviv	1989

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Associate Director-General, Ministry of Health	2017 to date
Associate Professor, Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva	2010 to date
Director, Public Health Services, Ministry of Health	2007–2017
Researcher and lecturer, Epidemiology Department, Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva	2004–2007
Head, Army Health Branch, Medical Corps, Israel Defense Forces	2001–2004
Head, Epidemiology Section, Medical Corps, Israel Defense Forces	1998–2000

Experience of working for and with international organizations **Year**

National representative, European Environment and Health Task Force	2008 to date
Developing public health capacities in China	2007 to date
Research collaboration with different international study groups (see attached list of selected publications)	2005 to date
National representative, World Health Assembly	2009, 2010, 2012, 2016
Working on polio eradication in Israel with WHO headquarters, WHO Regional Office for Europe, Independent Monitoring Board of the Polio Eradication Initiative	2013–2015
Consultant on public health systems and services, WHO Regional Office for Europe	2005

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

	<i>Year</i>
Head, Intergovernmental committee for development of medical services in northern Israel	2015 to date
Head, National Committee for Health Promotion Initiative	2012 to date
Director, Public Health Services	2007 to date
Chair, Intergovernmental committee for support to celiac patients in Israel	2015
Chair, Intergovernmental committee to reform the inspection of meat in Israel	2010–2011
Head, National Certification Committee for Poliomyelitis Eradication	2007

Name and position of person making nomination

M.K. Yakov Litzman, Minister of Health

Selected scientific publications relevant to international collaboration

1. Barnett DJ, Balicer RD, Lucey DR, Everly GS, Omer SB, Steinhoff MC, Grotto I. A systematic analytic approach to pandemic influenza preparedness planning: an application of the Haddon matrix. *PLoS Med.* 2005;2(12):e359.
2. Berman T, Goldsmith R, Goen T, Spungen J, Novack L, Levine H, Amitai Y, Shohat T, Grotto I. Urinary concentrations of organophosphate pesticide metabolites in adults in Israel: demographic and dietary predictors. *J Env Int.* 2013;60C:183–189.
3. Brosh-Nissimov T, Poles L, Kassirer M, Singer R, Kaliner E, Shriki DD, Anis E, Fogel I, Engelhard D, Grotto I. Preparing for Imported Ebola Cases in Israel, 2014 to 2015. *Euro Surveill.* 2015;20(44):pii:30054.
4. Grotto I, Leventhal A. Are WHO/Euro system framework functions applicable to public health services? *International Public Health Journal.* 2009;1:115–118.
5. Kaliner E, Kopel E, Anis E, Mendelson E, Moran-Gilad J, Shulman LM, Singer SR, Manor Y, Somekh E, Rishpon S, Leventhal A, Rubin L, Tasher D, Honovich M, Moerman L, Shohat T, Bassal R, Sofer D, Gdalevich M, Lev B, Gamzu R, Grotto I. The Israeli public health response to wild poliovirus importation. *Lancet Infect Dis.* 2015;15:1236–1242.
6. Kopel, E, Kaliner E, Grotto I. Lessons from a public health emergency – importation of wild poliovirus to Israel. *N Engl J Med.* 2014;371:981–983.
7. Kranzler Y, Davidovich N, Fleischman Y, Grotto I, Moran DS, Weinstein R. A health in all policies approach to promote active, healthy lifestyle in Israel. *Isr J Health Policy Res.* 2013;2(1):16.
8. Levine H, Berman T, Goldsmith R, Göen T, Spungen J, Novack L, Amitai Y, Shohat T, Grotto I. Exposure to tobacco smoke based on urinary cotinine levels among Israeli smoking and non-smoking adults: a cross-sectional analysis of the first Israeli human biomonitoring study. *BMC Pub Health.* 2013;13:1241.
9. Moran-Gilad, J, Mentasti M, Lazarovitch T, Huberman Z, Stocki, T, Sadik C, Shahar T, Anis E, Valinsky L, Harrison T, Grotto I. Molecular Epidemiology of Legionnaires' Disease in Israel. *Clin Microbiol Infect.* 2014;20(7):690–696.

10. Napoli C, Dente MG, Kärki T, Riccardo F, Rossi P, Declich S. Network for the Control of Cross-Border Health Threats in the Mediterranean Basin and Black Sea. Screening for infectious diseases among newly arrived migrants: experiences and practices in non-EU countries of the Mediterranean Basin and Black Sea. *Int J Environ Res Public Health*. 2015;12(12):15550–15558.
11. Sloom F, Hoeve HL, de Kroon ML, Goedegebure A, Carlton J, Griffiths HJ, Simonsz HJ, EUSCREEN Study Group. Inventory of current EU paediatric vision and hearing screening programmes. *J Med Screen*. 2015;22(2):55–64.
12. Tulchinsky TH, Ramlawi A, Abdeen Z, Grotto I, Flahault A. Polio lessons 2013: Israel, the West Bank, and Gaza. *Lancet*. 2013;382(9905):1611–1612.

Letter of intent

Dear Colleagues,

It is my honour as Minister of Health of the State of Israel to present to your consideration the candidacy of Professor Itamar Grotto Standing Committee of the Regional Committee for Europe of WHO.

Prof. Grotto is Associate Director General of the Ministry of Health of the State of Israel. He has vast experience in public health policies, as his former position was Director of Public Health Services at the Ministry of Health. This enriched his experience and expertise in many fields, especially universal health coverage, promoting public health and healthier lifestyle, mitigating environmental hazards as well as infectious disease surveillance and control.

The Israeli Ministry of Health and the WHO have many similarities in their priorities and agendas, including:

Health and the Environment: Israel is deeply involved in the European Environment and Health Process (EHP) addressing key environment and health challenges included in the Parma Declaration (2010), mainly air pollution, safe drinking water, and the impact of climate change. Israel has hosted the last mid-term meeting in Haifa, Israel in April 2015.

Infectious Disease Surveillance and Control: Israel has broad experience in infectious diseases outbreak preparedness and response. Israel has played an important role in the global fight against Ebola through its world's largest per-capita financial contribution, sending fully equipped medical clinics, contributing anti-Ebola medications to Sierra Leone and Liberia, and sending infectious disease experts to Ethiopia and Cameroon to train local health workers to prevent further spread.

Emergency Preparedness: Israeli professionals as well as the national system have wide experience in preparedness and response to public health emergencies. For years, Israel dispatched emergency medical teams to disaster areas around the world. In November 2016, WHO has recognized Israel's expertise and capabilities and awarded Israel's EMT's and Field Hospital the highest ranking by the Organization: Type 3 classification. Israel can and has been contributing to WHO efforts for the WHO Health Emergencies Programme.

Health and well-being: Israel's ministry of health is promoting a national plan for healthy, active living, focusing on the younger generation and titled with the goal of "Ending Child Obesity". Professor Grotto has been leading this campaign, creating the national policy and guiding its implementation.

Using Israeli knowledge and his own expertise, Professor Grotto will work to promote other key priorities within WHO, such as the well-being of people with disabilities and support the research for the creation of innovative solutions to health challenges, especially with regard to noncommunicable diseases (NCDs).

Israel is committed to promote these priorities in collaboration with other member states by leading initiatives, hosting expert meetings and seminars in Israel. We hope to achieve visible and sustainable growth in all priorities, in accordance with WHO standards and goals.

For years, Israel has been providing some of the best health services to both its citizens and others in our region and in the world. As member of the regional standing committee, Professor Grotto will bring this experience and knowledge to WHO, particularly in the fields the health and public policies, as well as in the strategic conduct of the organization, striving to make the best policy recommendations, while dealing with challenging and limited resources. Believing in WHO's goal and SDG 3, Israel is committed to share its knowledge and experience to all Member States to build a better, healthier future for people all over the world.

In view of the above, the Government of the State of Israel strongly believes Dr Grotto will bring significant added value to the work of the Standing Committee of the Regional Committee for Europe.

With high esteem,

Yours sincerely,

M.K. Yakov Litzman
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: LITHUANIA

Family name ŠTELEMĖKAS **First/Other names** Mindaugas

Male/Female Male **Date of birth** 29 September 1984

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctor of Philosophy (PhD) in Biomedical Sciences, Lithuanian University of Health Sciences, Kaunas	2014
Master's degree in Management of Public Health, Kaunas University of Medicine, Kaunas	2009
Master's degree in Health Economics, University of York, York, United Kingdom	2008
Bachelor's degree in Public Health, Kaunas University of Medicine, Kaunas	2007

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Head, Institute of Health Research, Faculty of Public Health, Lithuanian University of Health Sciences, Kaunas Clinics, Kaunas	2016 to date
Lecturer, Department of Preventive Medicine, Faculty of Public Health, Lithuanian University of Health Sciences, Kaunas Clinics, Kaunas	2014 to date
Senior specialist, Department of Innovation Assessment and Deployment, Hospital of Lithuanian University of Health Sciences, Kaunas Clinics, Kaunas	2014 to date
Junior scientist, Institute of Health Research, Faculty of Public Health, Lithuanian University of Health Sciences, Kaunas Clinics, Kaunas	2011 to date

Experience of working for and with international organizations **Year**

Head, WHO countrywide integrated noncommunicable disease intervention (CINDI) programme in Lithuania under the responsibilities of the Institute of Health Research (WHO Collaborating Centre for the Prevention and Control of Noncommunicable Diseases)	2016 to date
Alternate national representative, Programme, Budget and Administration Committee (PBAC) of the Executive Board during Lithuania's term on PBAC	2013–2015
National delegate, WHO's first (June) and second (November) Financing Dialogue with Member States, Geneva, Switzerland	2013
National Ministry of Health delegate, 63rd session of the WHO Regional Committee for Europe, Çeşme Izmir, Turkey	2013

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Name and position of person making nomination

Professor Aurelijus Veryga, Minister of Health

Letter of intent

Lithuania and the WHO Regional Office for Europe have a long lasting effective and successful cooperation. Lithuania consistently and continuously implements WHO recommendations in various areas of public health.

The collaboration between WHO Regional Office for Europe and Lithuania has produced substantial results and has influenced the formation of the Lithuanian health policy.

According to the Health 2020 agenda Lithuania has formed one of its major national health policy document: “Lithuanian Health Strategy 2014–2025” which sets our long term strategic priorities in the health area.

It is worth mentioning the mutual benefit from the two WHO Collaborating Centers at the Lithuanian University of Health Sciences: WHO Collaborating Centre for the Prevention and Control of Noncommunicable Diseases and WHO Collaborating Centre for Nursing Education and Practice. In order to strengthen rich partnership with WHO, Lithuania had a privilege to host the 65th Session of Regional Committee for Europe of WHO in 2015 and the Regions for Health Network Annual Meeting in 2016.

The main objective of the Lithuanian health policy is the aspiration to increase life expectancy, as well as to improve the quality of life and increase the number of healthy years of life. During a three-year term in the Standing Committee of the Regional Committee for Europe Lithuania would be willing to focus on these priorities:

- (1) To advocate for formation of efficient and transparent health care system through increase of quality of health care and accessibility to health care services.
- (2) To put greater emphasis on the development of effective disease prevention as a key to significantly reduce the burden of disease, premature death and disability in Europe.
- (3) To advocate for effective fight against addictions and assistance to victims. The use of alcoholic beverages and tobacco are the two of the four major health risk factors that contribute to the emergence of large share of chronic infectious diseases. Therefore, we are ready to pay special attention to the control of the above mentioned risk factors.
- (4) To support the development of policies and comprehensive strategies for improving mental health. The fact that 9 out of 10 countries with the highest rates of suicide in the world are in the European Region sends strong signal to prioritize mental health on the regional agenda and Lithuania strongly supports that.
- (5) To advocate for health care policy in all areas as a key element of achieving Sustainable Development Goals in the WHO European Region through the intersectoral cooperation and involvement of different actors.

We strongly believe that the membership of Lithuania at the Standing Committee of the Regional Committee for Europe will bring long lasting and substantial results for WHO European Region.

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: POLAND

Family name RUTKOWSKA **First/Other names** Katarzyna Karolina

Male/Female Female **Date of birth** 3 June 1978

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German	X	X	X
Russian			

Professional education: name (up to 5) most important professional degrees taken **Year**

Master's degree in Developmental Aid, Diplomatic School of the Spanish Ministry of Foreign Affairs and Cooperation, Madrid, Spain 2011

National School of Public Administration, Warsaw 2005

Master's degree in International Relations, Warsaw University, Faculty of Journalism and Political Science, Warsaw 2002

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Deputy Director, International Cooperation Department, Ministry of Health 2012 to date

- Supervises both bilateral and multilateral cooperation of the Ministry (that is, with international organizations such as the United Nations, WHO, the Organisation for Economic Co-operation and Development (OECD) and the Council of the European Union)
- Represents the Minister of Health on the Development Cooperation Policy Council (advisory body to the Ministry of Foreign Affairs)

Adviser to the Minister/Head, Bilateral Cooperation Unit, International Cooperation Department, Ministry of Health 2008–2012

- Responsible for bilateral cooperation of the Ministry of Health, including the drafting of international agreements

Expert/Senior Expert/Head, New Approach Directives Unit, Market Surveillance Department, Office of Competition and Consumer Protection 2005–2008

- Responsible for administrative proceedings under General Product Safety Directive 2001/95/EC
- Coordination of market surveillance activities conducted by eight specialized authorities

Experience of working for and with international organizations	Year
Head, Polish delegation to the OECD Health Ministerial Meeting	2017
Member, Polish delegation to the World Health Assembly	2012, 2014, 2016
Head, Polish delegation to the WHO Regional Committee for Europe	2013, 2015
National representative, Working Group on Technical Harmonization, Council of the European Union	2006–2008
• Draft regulation on accreditation and market surveillance	
National representative, Committee established under General Product Safety Directive 2001/95/EC	2006

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level	Year
WHO National Counterpart	2013 to date
Chair, Committee on Credentials, Sixty-ninth World Health Assembly	2016

Name and position of person making nomination

Dr Konstanty Radziwiłł, Minister of Health

Letter of intent

Honourable Dr Zsuzsanna Jakab,

Following your letter of 31 March on extending the deadline for submitting nominations to the Standing Committee of the Regional Committee for Europe, I would like to propose the candidature of Poland to this body.

The Republic of Poland is highly committed to achieving the mission and goals of the World Health Organization.

WHO is in the process of many changes. Evolving political, financial and health context forces the Organization to change the way it worked for many years. The ongoing process of WHO reform, elaborating FENSA and the close collaboration with other global and regional organizations are selected factors shaping the new approach to governance and management issues.

Poland is willing to support WHO in implementing and accelerating the reform. We are ready to engage in and stimulate the discussion on how to use WHO's financial and human resources to get the best value and to avoid overlapping with other organizations. We are ready to contribute to discussion on prioritization of WHO's work. Poland is a country that shares the perspective and experience of western and eastern parts of the Region and we consider it would be big asset in the Standing Committee.

In strict health context, Poland confirms its priorities outlined in the letter of intent presented in support of our candidature to the Executive Board. Let me briefly reiterate that:

- (1) Poland would like to draw the attention of the international health community to the great deficiencies in patient safety, education and training and healthcare accountability. Quality of care has not been given due recognition in global health policy. There are huge gaps between countries in prioritizing harm reduction. Equally important is a need for further consideration and research on linking healthcare safety and cost effectiveness.
- (2) Poland attaches great importance to the fight with ever-growing burden of non-communicable diseases. Polish government undertakes a numerous legislative and other initiatives aimed at promoting healthy habits, including alleviating the burden of obesity and its consequences. One of our top priorities is tobacco control.
- (3) Poland sees the necessity to further promote and strengthen universal health coverage, being the indispensable element of universal access to good quality, affordable and safe healthcare.

Poland would like to stimulate the international debate on issues of NCDs, patient safety, tobacco control and UHC. We will seek to promote solutions and practices that are cost-effective and affordable, so that they could be followed by all Member States. We aim at bridging the health gap in societies and reducing health inequalities, especially in young generation.

The above described activities generate a clear message that Poland is willing to promote and implement WHO's global vision related to NCDs and patient safety and pursue further the challenge of linking it to the implementation of Sustainable Development Goals (SDGs) and universal health coverage. This should be done via effective tools, within reasonable resources and with consideration of country-specific circumstances.

Taking into consideration the relevance of these priorities, I kindly ask to consider the candidature of Ms Katarzyna Rutkowska for the member of the Standing Committee of the Regional Committee for Europe.

Ms Katarzyna Rutkowska has extensive experience in international cooperation in the field of health. She has been working in the Ministry of Health for nine years, holding the senior-level positions in the Department of International Cooperation. Since 2013 she has served as a WHO National Counterpart and has been directly responsible for cooperation of Poland with WHO (and with other international organizations). Due to her participation in EU working groups and WHO governing bodies, as well as her academic profile, she has acquired necessary experience in international environment. Her current position proves her high-level managerial skills.

I believe Ms Rutkowska will contribute significantly to the work of the Standing Committee and the promotion of the important health issues at European and global level, with the benefit to all Member States and the WHO Secretariat.

Sincerely yours,

Konstanty Radziwiłł
Minister of Health

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: RUSSIAN FEDERATION

Family name GABBASOVA **First/Other names** Lyalya Adygamovna

Male/Female Female **Date of birth** 29 April 1957

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctoral degree in Pharmacology and Clinical Pharmacology 2006

Doctoral candidate in Cardiology 1997

Internal Medicine Residency 1990–1992

Doctor of Medicine (MD) in General Medicine, Medical Academy 1976–1982

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Assistant to the Minister of Health 2013 to date

Director, Department of Specialized Medical Care and Standardization in Health Care,
Ministry of Health 2012–2013

Director, Department of High-tech Medical Care, Ministry of Health and Social
Development 2009–2012

Professor, Department of Internal Medicine, Endocrinology and Clinical Pharmacology,
State Educational Institution for Continuing Profession Education, Ural Medical
Academy of Continuing Education 1993–2008

Experience of working for and with international organizations **Year**

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Coordinator of activities to counter the spread of HIV, developer (co-author) of the State
Strategy to Counter the Spread of HIV Infections in the Russian Federation to 2020 and
beyond 2015 to date

Coordinator, Antimicrobial Resistance Programme 2014 to date

Co-chair, High-level Working Group (WHO and Russian Ministry of Health) on current
challenges of delivering medical care to tuberculosis patients 2012–2016

Name and position of person making nomination

Veronika Skvortsova, Minister of Health

Letter of intent

Dear Ms Jakab,

The Russian Federation is interested in taking part in the work of the Standing Committee of the Regional Committee for Europe (SCRC) as a member and considers the SCRC to be both a strategic and an operational governing body of the Member States of the European Region, enabling them to raise, discuss and outline possible solutions for priority public health issues in the Region. The Russian Federation would like to hold a seat on the SCRC because it believes that one of the most pressing challenges currently faced by health systems is the burden of chronic noncommunicable diseases (NCDs). Russia's input to and capacity for countering NCDs at the global and regional levels coupled with our possible role as a member of the SCRC will enable us to facilitate a most efficient implementation of the relevant European action plan.

Russia plans to continue to be actively involved in the development and implementation of programmes, including international ones, to counter the spread of communicable diseases, such as HIV/AIDS, tuberculosis, hepatitis, malaria, Ebola and others. In order to overcome the challenges of those diseases, which have been prioritized in the context of the SDGs, countries need to make joint efforts both to ensure a rapid response to emergencies and to identify new, effective means to prevent and treat those diseases. The challenges of communicable diseases are gaining increased relevance given the problem of antimicrobial resistance (AMR). The country has considerable experience in preventing communicable diseases, promoting the rational use of antimicrobials and implementing measures to prevent and control AMR in the human and animal health sectors. Russia supports the principles of an intersectoral approach to tackling AMR at the global, regional and local levels.

Russia also hopes that its participation in the work of the SCRC will allow it to accelerate the achievement of objectives under the four priority areas for cooperation identified in the Country Cooperation Strategy for the World Health Organization and the Ministry of Health of the Russian Federation:

- strengthening capacity for global and regional cooperation in health between the Russian Federation and WHO;
- creating a comprehensive environment of prevention and producing health through a life-course approach;
- improving health security through capacity-building; and
- strengthening the performance of the health system.

Our participation in the work of the SCRC will allow for an effective subregional cooperation and exchange of best practices and tools with the member Nations of the Commonwealth of Independent States and other Russian-speaking countries in the Region. This is all the more important considering that Russia makes voluntary contributions to support subregional programmes.

Given the size of Russia's territory and population in the European Region and the country's corresponding contribution to regional health outcomes, we consider it important for Russia to participate in the work of the SCRC to ensure an adequate and rapid response to emerging challenges and potential emergencies both within Russia and in our neighbouring countries, as well as in the European Region as a whole.

It is also important to consider that the modern-day migration processes within the European Region, in which the populations of the newly independent states is actively involved, require concerted and rapid decision-making to protect the health and well-being of the entire Region.

We would like to note that our active involvement in the work of various structures, committees, working groups and meetings organized by the World Health Organization (WHO) and the WHO Regional Office for Europe (WHO EURO) allows us to keep abreast of the processes and challenges addressed by WHO and WHO EURO, thus enabling our candidate to competently and quickly join in the work of the SCRC.

The Russian Federation therefore proposes the candidacy of Lyalya Adygamovna Gabbsova – a specialist who has relevant expertise in health systems priority areas and a good knowledge of national legislation and matters of international law and possesses considerable work experience as a member (and, in several cases, a leader) of delegations of the Russian Federation to the Executive Board and World Health Assembly sessions (since 2014), high-level meetings of the United Nations General Assembly (2016, HIV, AMR) and the UNAIDS Programme Coordinating Board (since 2015). The proposed candidate has notable work experience on the Steering Committee of the Council of Europe on the donation and transplantation of organs, tissues and cells. This topic is also very relevant for countries that base their work on the WHO Guiding Principles on Human Cell, Tissue and Organ Transplantation.

Please accept, dear Ms Jakab, the assurances of our highest consideration. We look forward to our continued collaboration.

D.V. Kostennikov
Minister, a.i.

NOMINATION FOR MEMBERSHIP OF THE STANDING COMMITTEE OF
THE REGIONAL COMMITTEE FOR EUROPE OF WHO

CURRICULUM VITAE

Member State making nomination: UZBEKISTAN

Family name SIDIKOV **First/Other names** Abdunomon Ergashevich

Male/Female Male **Date of birth** 23 September 1957

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken **Year**

Moscow Institute of Entrepreneurship and Law, Moscow, Russian Federation 2001

Tashkent Institute of Communications 1981

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Head, Department for Coordination of Foreign Economic Activities, Ministry of Health 1991 to date

Work in Communist Party bodies and economic agencies, Belarus 1987–1990

Experience of working for and with international organizations **Year**

Rapporteur of Committee B at the World Health Assembly session 2016

Participation in multiple high-level meetings of WHO and UNICEF 2001–2016

Regularly participated in the Health Assembly sessions 1996–2016

Regularly participated in the work of the WHO Regional Committee for Europe 1996–2016

Participated in the Standing Committee of the Regional Committee and WHO Executive Board sessions 2007–2012

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Ad-Interim Chair, Uzbekistan–France Friendship Society 2016 to date

Deputy Chair, Uzbekistan–France Friendship Society 1998–2016

Name and position of person making nomination

Minister of Health

Letter of intent

Abdunomon Ergashevich Sidikov was born on 23 September 1957 in Tashkent, Republic of Uzbekistan. Nationality: Uzbek. Married, with two children (son and daughter).

Graduated from Tashkent Institute of Communications in 1980 and from Moscow Institute of Entrepreneurship and Law in 2001.

Specialty: engineering, jurisprudence

Speaks fluent Russian and basic English.

From 1987 to 1990 worked for communist party bodies and economic agencies of the Republic of Belarus.

Since September 1991 to date the candidate has worked as Head of the Department for Coordination of Foreign Economic Activities, Ministry of Health of the Republic of Uzbekistan.

From 1997 to date he has served as Deputy Chair for the Uzbekistan–France Friendship Society.

Over the past years the candidate has managed to establish contacts and build good working relationships with representatives of international organizations, such as UNDP, UN agencies and funds (WHO, UNICEF, UNFPA, UNAIDS and other international governmental and nongovernmental organizations) in the context of an open dialogue to ensure coordination of efforts in priority programme areas.

From 2004 to 2006 participated in SCRC sessions as Deputy Representative of the Republic of Uzbekistan.

From 2012 to 2014 participated in the sessions of the WHO Executive Board as Deputy Representative of the Republic of Uzbekistan.

Since 1996 he has regularly and actively participated in the sessions of the World Health Assembly (WHA) and the WHO Regional Committee for Europe.

In 2016 the candidate participated in the WHA session as Rapporteur of Committee B.

Since 2001 he has been taking part in multiple high-level meetings of the WHO, including the one on the design and implementation of the Health 2020 policy framework.

Abdunomon Sidikov is a highly qualified expert in the area of public health. He has held managerial positions at the Ministry of Health and has proven himself to be a good leader, having a clear vision and capable of efficiently managing team work and demonstrating a high level of performance.

III. Policy and Coordination Committee of the Special Programme of Research, Development and Research Training in Human Reproduction

Terms of reference

16. The Policy and Coordination Committee (PCC) is the governing body of the Special Programme of Research, Development and Research Training in Human Reproduction.

2.1. Functions

The Memorandum on the Administrative Structure of the Special Programme of Research, Development and Research Training in Human Reproduction stipulates that PCC shall, for the purpose of coordinating the interests and responsibilities of the parties cooperating in the Special Programme, have the following functions:

- 2.1.1 To review and decide upon the planning and execution of the Special Programme. For this purpose it will keep itself informed of all aspects of the development of the Special Programme and consider reports and recommendations submitted to it by the Standing Committee referred to in Section 3 of this Memorandum (hereinafter called the Standing Committee), the Executing Agency and the Scientific and Technical Advisory Group referred to in Section 4 of this Memorandum (hereinafter called STAG).
- 2.1.2 To review and approve the plan of action and budget for the coming financial period prepared by the Executing Agency and reviewed by STAG and the Standing Committee.
- 2.1.3 To review the proposals of the Standing Committee and approve arrangements for the financing of the Special Programme.
- 2.1.4 To review proposed longer-term plans of action and their financial implications.
- 2.1.5 To review the annual financial statements submitted by the Executing Agency, and the audit report thereon submitted by the External Auditor of the Executing Agency.
- 2.1.6 To review periodic reports that will evaluate the progress of the Special Programme towards the achievement of its objectives.
- 2.1.7 To review and endorse the selection of members of STAG by the Executing Agency in consultation with the Standing Committee.
- 2.1.8 To consider such other matters relating to the Special Programme as may be referred to it by any Cooperating Party.

2.2. Membership

PCC shall consist of 34 members from among the Cooperating Parties as follows:

- 2.2.1 Largest financial contributors: 11 government representatives from the countries that were the largest financial contributors to the Special Programme in the previous biennium.

2.2.2 Countries elected by the WHO regional committees: 14 government representatives from Member States elected by the WHO regional committees for three-year terms according to population distribution and regional needs, distributed as follows:

Africa	4
Americas	2
South-East Asia	3
Europe	1
Eastern Mediterranean	1
Western Pacific	3

In these elections, due account should be taken of a country's financial and/or technical support to the Special Programme and its interest in the fields of family planning, research and development in human reproduction and fertility regulation, as demonstrated by national policies and programmes.

2.2.3 Other interested Cooperating Parties: two members elected by PCC for three-year terms from the remaining Cooperating Parties.

2.2.4 Permanent members: the Cosponsors of the Special Programme, the International Planned Parenthood Federation and the Joint United Nations Programme on HIV/AIDS.

Members of PCC in categories 2.2.2 and 2.2.3 may be re-elected.

Present membership

17. In accordance with the terms of reference of the Policy and Coordination Committee (see above), the European regional seat will become vacant on 31 December 2017, on the expiry of the term of office of Spain. Member States were therefore invited to submit applications for selection or reselection by the Regional Committee of one Member State for a three-year period from 1 January 2018.

18. A list of current members of the Policy and Coordination Committee³ is given below.

Category 1. Largest financial contributors in biennium 2010–2011

China	Netherlands
Flemish Government, Belgium	Norway
France	Sweden
India	Switzerland
Italy	United Kingdom of Great Britain and Northern Ireland
Japan	

³ At its 16th meeting in June 2003, the PCC endorsed the interpretation of section 2.2.1 of the Memorandum on the Administrative Structure of the Special Programme to mean that Category 1 membership should consist of representatives of the 11 largest donors not otherwise represented on the PCC under another category.

Category 2. Countries elected by the WHO Regional Committees

Bhutan	Lesotho
Bangladesh	Liberia
Ecuador	Malawi
El Salvador	Malaysia
Germany	Maldives
Kenya	Tunisia
Lao PDR	Viet Nam

Category 3. Other interested cooperating parties

Nepal	2012–2014
Turkey	2012–2014

Permanent members

United Nations Development Programme	} Cosponsors
United Nations Population Fund	
United Nations International Children's Emergency Fund	
World Health Organization	
The World Bank	

International Planned Parenthood Federation
Joint United Nations Programme on HIV/AIDS

Nominations

19. The following nomination was received at the Regional Office by 10 March 2017, and curricula vitae in standard format are contained on pages 66 to 70.

- Czech Republic (Dr Petr Velebil)
- Georgia (Dr Nino Berdzuli)
- Tajikistan (Dr Rakhmatullo Azizovich Rakhmonov)
- Uzbekistan (Dr Diloram Ilkhamovna Akhmedova)

Overview of membership

20. Table 4 shows the countries of the European Region that have designated members for the Policy and Coordination Committee from 1997 to 2017.

Table 4. Membership of the Policy and Coordination Committee, 1997–2017

Country	1997–1999	2000–2002	2003–2005	2006–2008	2009–2011	2012–2014	2015–2017
The former Yugoslav Republic of Macedonia	XXX						
Uzbekistan		XXX					
Slovenia			XXX				
Armenia				XXX			
Ukraine					XXX		
Germany						XXX	
Spain							XXX

NOMINATION FOR MEMBERSHIP OF THE POLICY AND COORDINATION COMMITTEE
OF THE SPECIAL PROGRAMME OF RESEARCH, DEVELOPMENT AND
RESEARCH TRAINING IN HUMAN REPRODUCTION

CURRICULUM VITAE

Member State making nomination: CZECH REPUBLIC

Family name VELEBIL **First/Other names** Petr

Male/Female Male **Date of birth** 10 June 1956

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian	X	X	

Professional education: name (up to 5) most important professional degrees taken **Year**

Sub-specialization in Feto-Maternal and Perinatal Medicine	2011
Specialization in Obstetrics and Gynaecology, second degree	1996
Graduate, Epidemic Intelligence Service, United States Centers for Disease Control and Prevention (CDC), Atlanta, United States of America (USA)	1993
Doctor of Philosophy (PhD), Charles University, Prague	1989
Specialization in Obstetrics and Gynaecology, first degree	1984

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Consultant to the Ministry of Health, Perinatology Advisory Board	1995 to date
Chief, Perinatal Centre, Institute for the Care of Mother and Child	2001
Chief, Labour and Delivery Department, Institute for the Care of Mother and Child	1999/2001
Medical Officer, CDC, Division of Reproductive Health, Atlanta, USA	1993/1994
Epidemic Intelligence Officer, Visiting Scientist, CDC, Atlanta, USA	1991/1993

Experience of working for and with international organizations **Year**

Executive Board Member, European Board and College of Obstetrics and Gynaecology	2016 to date
Chief, WHO Collaborating Centre in Perinatal Medicine	2015 to date
Member, European Board and College of Obstetrics and Gynaecology	2012–2014
Chief, WHO Collaborating Centre in Perinatal Medicine	2001–2009
WHO Regional Advisory Panel on Research and Training in Reproductive Health in the European Region	2001–2009
Consultant, World Bank, WHO, United States Agency for International Development	1995–1996

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

President, Advisory Board of the Czech National Registry of Reproductive Health	2016 to date
President, Advisory Board of the Czech National Registry of Parturients	2002–2015

Name and position of person making nomination

Dr Miloslav Ludvík, MBA, Minister of Health

NOMINATION FOR MEMBERSHIP OF THE POLICY AND COORDINATION COMMITTEE
OF THE SPECIAL PROGRAMME OF RESEARCH, DEVELOPMENT AND
RESEARCH TRAINING IN HUMAN REPRODUCTION

CURRICULUM VITAE

Member State making nomination: GEORGIA

Family name BERDZULI **First/Other names** Nino

Male/Female Female **Date of birth** 25 November 1973

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken *Year*

Doctor of Philosophy (PhD), Institute of Clinical Medicine/Institute of Health Services and Research, University of Oslo, Norway	2014–2017
Master's degree in Public Health (MPH), Department of International Health, Rollins School of Public Health, Emory University, Atlanta, United States of America (USA)	2002–2004
Obstetrician Gynaecologist, Georgia State Medical University, Department of Obstetrics and Gynaecology, Tbilisi	1996–1999
Doctor of Medicine (MD), Georgia State Medical University, Tbilisi	1990–1996

Professional career: list current post first, followed by up to four most important positions held *Year (start/end)*

Deputy Minister, Ministry of Labour, Health and Social Affairs	11/2015 to date
Chief of Party, Georgia Sustaining Family Planning and Maternal and Child Health Services (SUSTAIN), United States Agency for International Development (USAID)/SUSTAIN project, John Snow, Inc., JSI Research & Training Institute, Inc., Tbilisi	10/2013–10/2015
Senior Technical Adviser, John Snow, Inc., Arlington, USA	2009–2013
Programme Director, USAID: The Europe and Eurasia Regional Family Planning Activity, Reproductive Health Programme, John Snow, Inc., Arlington, USA	2006–2009
Deputy Chief of Party/Technical Adviser, Healthy Women in Georgia, John Snow, Inc., JSI Research & Training Institute, Inc., Tbilisi	2004–2006
Research Associate, United States Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention, Atlanta, USA	2003–2004
Founder/President, Women Wellness Care Alliance HERA, Kutaisi	2000–2003
Gynaecologist/Surgeon, Department of Gynaecological Oncology, National Cancer Center, Tbilisi	1999–2002
Obstetrician/Gynaecologist, Maternity Hospital No. 3, Kutaisi	1996–1999

Experience of working for and with international organizations

Year

Chief of Party, USAID/SUSTAIN project, John Snow, Inc., JSI Research & Training Institute, Inc., Tbilisi	10/2013–10/2015
Senior Technical Adviser, John Snow, Inc., Arlington, USA	2009–2013
Programme Director, USAID: The Europe and Eurasia Regional Family Planning Activity, Reproductive Health Programme, John Snow, Inc., Arlington, USA	2006–2009
Deputy Chief of Party/Technical Adviser, Healthy Women in Georgia, John Snow Inc., JSI Research & Training Institute, Inc., Tbilisi	2004–2006
Research Associate, CDC, National Center for Chronic Disease Prevention, Atlanta, USA	2003–2004

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level

Year

Chair, National Cancer Committee	2015 to date
Chair, National Policy and Advocacy Advisory Committee (PAAC), Global Fund Transition Programme	2015 to date
Chair, National Primary Health Care Committee	2015 to date
Vice-Chair, National Maternal and Child Health Committee	2015 to date

Name and position of person making nomination

Mr David Sergeenko, Minister of Labour, Health and Social Affairs

NOMINATION FOR MEMBERSHIP OF THE POLICY AND COORDINATION COMMITTEE
OF THE SPECIAL PROGRAMME OF RESEARCH, DEVELOPMENT AND
RESEARCH TRAINING IN HUMAN REPRODUCTION

CURRICULUM VITAE

Member State making nomination: TAJIKISTAN

Family name RAKHMONOV **First/Other names** Rakhmatullo Azizovich

Male/Female Male **Date of birth** 28 March 1963

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English			
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken **Year**

Doctoral degree 2004

Doctoral candidate 1996

Predocctoral fellow, Research Institute for Medical Genetics, Tomsk, Russian Federation 1991–1995

Tajik State Medical University 1987

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Chair, Neurology and Basic Medical Genetics Department, Avicenna Tajik State Medical University 2007 to date

Vice-President, Academy of Medical Sciences, Ministry of Public Health Services 2016

Head, International Relations Office 1993

Experience of working for and with international organizations **Year**

WHO Liaison Officer 1996–1998

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Name and position of person making nomination

Olimzoda Nasim Khoja, Minister of Health and Social Protection

NOMINATION FOR MEMBERSHIP OF THE POLICY AND COORDINATION COMMITTEE
OF THE SPECIAL PROGRAMME OF RESEARCH, DEVELOPMENT AND
RESEARCH TRAINING IN HUMAN REPRODUCTION

CURRICULUM VITAE

Member State making nomination: UZBEKISTAN

Family name AKHMEDOVA **First/Other names** Diloram Ilkhamovna

Male/Female Female **Date of birth** 5 February 1957

Language abilities: please indicate in which of the Regional Committee working languages the nominee is able to function effectively

	Speak	Read	Write
English	X	X	X
French			
German			
Russian	X	X	X

Professional education: name (up to 5) most important professional degrees taken **Year**

Professorship	2002
Doctoral degree in Medical Sciences	1998
Doctoral candidate in Medical Sciences	1989
Central Asian Pediatric Medical Institute	1980

Professional career: list current post first, followed by up to four most important positions held **Year (start/end)**

Director, National Specialized Scientific and Practical Medical Centre of Paediatrics	2012 to date
Head, Main Department of Maternal and Child Health	2010–2012
Deputy Rector, Tashkent Pediatric Medical Institute	2006–2010
Chair, Childhood Diseases Department, Tashkent Medical Academy	1999–2006

Experience of working for and with international organizations **Year**

National representative, development and implementation meetings of UNDAF programmes and WHO, UNICEF and UNFPA country programmes	2006 to date
National representative, numerous WHO and UNICEF meetings	2001 to date

Experience of acting as Chairperson of high-level political and technical committees at national and/or international level **Year**

Chair, Association of Pediatricians of the Republic of Uzbekistan	2009 to date
Coordinator of WHO and UNICEF child health programmes on nutrition and prevention of micronutrient deficiency, monitoring of child growth and development, integrated management of childhood illnesses, and child obesity	2006 to date
Chief Pediatrician, Ministry of Health	2001 to date

Name and position of person making nomination

Minister of Health