

## **Regional Committee for Europe**

66th session

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Provisional agenda item 5(g)

EUR/RC66/15 Add.1

1 August 2016 160497

ORIGINAL: ENGLISH

## Financial and administrative implications for the Secretariat of the draft Regional Committee resolution on Strengthening people-centred health systems in the WHO European Region: a framework for action on integrated health services delivery

1. Resolution: EUR/RC66/Conf.Doc./11

2. Linkage to the current programme budget (PB)

Will this resolution directly contribute to the outcome(s) and output(s) set out in the current PB. If so, please specify:

Category(ies): 4 Health systems Outcome(s): 4.2 Output(s): 4.2.1; 4.2.3

Programme area(s): 2 Integrated people-

on other parts of the same output.

centred health services

Describe the nature and extent of this contribution, including whether there will be an impact

The integration of health services is fully embedded in the Twelfth General Programme of Work 2014–2019 and articulates other specific streams of work, particular on the health workforce (4.2.2) and public health. Quality of care, including patient safety (4.2.3) is an outcome that encompasses performance improvement proposed under 4.2.1 from a more comprehensive, person-facing and health systems perspective and is fully acknowledged in the Framework for action on integrated health services. The aim of the Framework is to put the individual person and his/her health needs at the centre of the provision of services, recognizing the role of a primary health care approach to tackle upstream determinants of health by deploying a broad, prevention-oriented public health strategy. It proposes the alignment of institutional settings, accountability mechanisms, financing tools and resources to support services that are designed around people, coordinated with a life-course approach, managed effectively and based on performance improvement mechanisms that assure effectiveness, comprehensiveness, safety around patients and quality of care, as a whole.

- 3. Estimated cost and staffing implications in relation to the PB
  - (a) Total cost

Indicate (i) the lifespan of the resolution during which the Secretariat's activities would be required for implementation and (ii) the cost of those activities (estimated to the nearest US\$ 10 000).

- 4 years (covering the period 2017–2020)
- (ii) Total: US\$ 5 600 000 (staff: US\$ 3 800 000; activities: US\$ 1 800 000)

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3. Es	3. Estimated cost and staffing implications in relation to the PB (cont.)				
<b>(b)</b>	) <b>C</b>	Cost for the current biennium			
	(e	Indicate how much of the cost indicated in 3(a) is for the current biennium (estimated to the nearest US\$ 10 000).  Total: US\$ 1 400 000 (staff: US\$ 950 000; activities: US\$ 450 000)			
		·			
		Is the estimated cost fully included within the current approved PB? Yes			
	If	If "no", indicate how much is not included.  US\$			
(c)	) <b>C</b>	Cost for future bienniums			
	Estimated cost per future biennium 2018–2019: Total US\$ 2 500 000				
		<b>2020–2021</b> : Total US\$ 1 700 000			
<b>(d)</b>		Staffing implications			
		Could the resolution be implemented by existing staff?			
		No			
		If "no" indicate how many additional staff – full-time equivalents.			
		full-time equivalency (FTE) to R plan)	emporary P2/P3 positions (2	positions are already in the	
4. Fu	undi	nding			
Is	Is the estimated cost for the current biennium indicated in 3(b) fully funded?				
Ye	Yes				
	If "no", indicate the funding gap and how the funds would be mobilized (provide details of expected source(s) of funds).				
US	US\$; source(s) of funds:				

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