Comparative Matrix of Recommendations from PAHO Processes

SUBJECT	PAHO in the 21st Century	Recommendations on the External Auditor's Report	Report on the Activities of the Internal Oversight Services	Institutional Change Within the Pan American Sanitary Bureau
Development of Associations and Partnerships	PAHO should strive to continuously improve the coordination of its activities with other agencies of the United Nations system and the International Financing Institutions (IFIs) not only at the regional level but particularly at the national level. 1.1.PAHO should replicate its Shared Agenda Initiative with the IDB and the World Bank at the national level, developing strategic plans with the countries that include well-coordinated activities and the formation of partnerships and associations with these agencies at the national level. 1.2.PAHO should instruct its Representative Offices to disseminate information about the regional agreements and partnerships that it enters into with other specialized health agencies and execute them at the national level.	PAHO should expect its partners to conform to the ethical standards it sets for itself		• Regular contact with the UN Development Group (UNDG) secretariat to ensure PAHO's presence in UNDG meetings and strengthen contribution to UNDG regional work plan. •
	PAHO should work with its sister agencies to simplify and harmonize the mandatory reporting processes that are requested from Member States	PAHO should exert greater control over the use of its name and logo		
	PAHO should enhance/strengthen/clarify its	PAHO should establish appropriate policies and		

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Development of Associations and Partnerships	relationship with the Inter American System. 3.1.PAHO should pursue a strategy to harmonize its policies and strategies with those of the OAS to enhance the relationship between the two organizatons and generate opportunities to improve health in the region. 3.2.PAHO should play a greater role in the subregional integration processes in the Americas, helping the countries to give health its proper place on the subregional and regional political agenda.	guidelines to cover the management of relationships with third party organizations, supported by Memoranda of Understanding in individual cases to define the relationship, roles, and responsibilities of the parties.		
	PAHO should step up efforts to enhance cooperation for the Region. 4.1. PAHO should make the serious inequality and gaps in income and social indicators in Region known to the various international bilateral cooperation agencies by participating more actively in the various forums and taking advantage of opportunities inside and outside the United Nations system. 4.2.PAHO should work to collect information about			• Dialogue on new programmatic approaches with the main bilateral partners such as USAID, CIDA (Canada), SIDA (Sweden), NORAD (Norway) and AECI (Spain).

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	international cooperation that will enable it to identify ODA trends and anticipate changes in regional priorities and the areas targeted by the main cooperating parties--information that should be adequately communicated to the countries.			
Development of Associations and Partnerships	PAHO should offer technical cooperation for better utilization/channeling of financial resources and investment from national and international sources to promote health in the Region. 5.1.PAHO should offer technical cooperation to the ministries of health to facilitate their negotiations with the national institutions responsible for financing health matters, taking into account the contribution of health to development.			
	PAHO should strengthen its technical cooperation to Member States in order to increase their capacity to mobilize additional resources.			
	PAHO should engage its external relations activities more fully in technical cooperation with Member			

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Development of Associations and Partnerships	States. 7.1.PAHO should provide the external relations activities with greater financial and human resources. 7.2.PAHO should strengthen the Representative Offices with experts in negotiation and resource mobilization, providing direct support for the respective Representatives in their technical assistance to the countries.			
	PAHO should regularly update its administrative processes in keeping with global initiatives for harmonization and alignment of cooperation			
	PAHO should provide assistance to Member States to obtain knowledge about new financial cooperation modalities and disseminating information about them. 9.1.PAHO should disseminate information on the new modalities available for accessing reimbursable and nonreimbursable financial cooperation, through bulletins, forums, and at least one annual meeting of the offices in charge of international cooperation in health.			

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	9.2.PAHO should set up a Clearinghouse on international cooperation in health that makes information on potential cooperating partners and new cooperation modalities available to the countries			
Development of Associations and Partnerships	PAHO should facilitate horizontal cooperation among the countries of the Region for the creation of strategic partnerships and the mobilization of health cooperation resources. 10.1.PAHO should promote exchange programs between the countries' international cooperation offices. 10.2.PAHO should organize at least one annual meeting of the Region's offices in charge of international cooperation in health.			• Enhance Technical Cooperation among Countries (TCC) as a mechanism for capacity building within the countries and as opportunity to establish partnerships with institutions outside ministries of health. Such networks are required for achieving the Millennium Development Goals (MDGs).
Technical Cooperation Modalities in Health	PAHO should promote and strengthen its participation as an active partner in technical cooperation with and among the Member States. 1.1 PAHO should support Member States in the search for and identification of strategic partnerships with public and private			• Review roles, relationships and work processes across the Organization to ensure that work at the various levels adds value to country level cooperation. •

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	actors who, at the global level, have gained a reputation in the field of international health. 1.2 PAHO should develop mechanisms that help Member States to identify, build, take advantage of, and export their experiences, capacities, and strengths, known as "best practices." 1.3 PAHO should develop and support the creation and consolidation of more innovative cooperation modalities.			
Technical Cooperation Modalities in Health	PAHO should improve its traditional mechanisms for classifying or measuring levels of well-being in the Member States. 2.1 PAHO should adopt fairer and more objective mechanisms to identify the degree or level of well-being of Member States in terms of health.			Focus on responding to needs of Key Countries now incorporated in PAHO's planning processes.
	PAHO should support the Members States in planning the cooperation that they can receive or offer. 3.1 PAHO should offer support to Member States		With regard to the PAHO/WHO Representation in Port-au-Prince, Haiti, the audit identified the need to formalize cash movements	•

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	that desire assistance in conducting an internal analysis of their challenges, weaknesses, and needs in health to better orient cooperation to the countries. 3.2 PAHO should support the identification of strengths in health within Member States, together with the sharing of these strengths with other Member States.		and fund balances for local currency bank accounts. It noted that compliance was weak with respect to controls over contracting activities. The accounting transactions related to the Essential Medicines Programme did not appear to be accurately reported or recorded, and weaknesses in the inventory controls called into question the validity of the project's inventory records.	
Technical Cooperation Modalities in Health			Regarding the PAHO/WHO Office in Guatemala City, Guatemala, the audit noted a lack of compliance with controls over contracting activities, which resulted in a situation where obtaining value for money cannot be clearly demonstrated. The audit further disclosed that excessive rights granted to staff conflicted with proper segregation of duties for major computer systems in use. There was no off-site storage of back-up data.	•
				Reformulation of the

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Technical Cooperation Modalities in Health				technical collaboration programs with sub regional health institutions according to their stated priorities; some common areas are essential drug policies, border health and social protection in health among others.
Governance	PAHO should involve the Member States in the design and implementation phase of policies, plans and programs being designed and implemented by the Secretariat. 1.1.There must be dialogue and consultation with member states to ensure their active participation in PAHO's activities.			• Systematic use of CCS as a tool for programming, involving all levels of the organization.
	PAHO should provide in advance of the Governing Body meetings all documents related to agenda items via the web page for rapid and easy access by users inside and outside the Organization in accordance with rules of procedures. 2.1.PAHO must ensure early translation of documents, easy access to the documents and must provide all relevant background materials in			

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	advance.			
Governance	PAHO should review its relationship with these entities and should hold special sessions and fora for the civil society organizations. 3.1.Review existing Standing Committee on NGO's to strengthen criteria for their participation.			
	PAHO should encourage Member States to include specialists from other sectors in their delegations to Governing bodies.			
	PAHO should develop a more formal transparent process for selecting candidates for the top senior posts in the Organization. PAHO should introduce a more formal transparent process for selecting senior staff, in order to ensure greater regional representation and cultural diversity in the selection of senior level staff and provide an equitable opportunity for all Member States to have candidates for consideration for these three senior level posts.			
	PAHO should clearly articulate the criteria for the distribution of budget allocations to			

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Governance	countries. PAHO should be transparent in selecting the indices for determining needs/priorities in countries including the criteria and indices used for the priority countries (Haiti, Guyana, Bolivia, Nicaragua and Honduras. 6.1.PAHO should provide Member States with all documentation on budget allocations in a timely manner; 6.2. PAHO should provide Member States with all the criteria and indices used in budget allocations to countries.			
	PAHO should provide Member States with data on its operational, managerial and financial practices. 7.1. (a) PAHO should establish a permanent Standing Audit and Evaluation Committee comprising the current external auditing mechanism of the organization, along with elected representatives from among the Member States, Associates Members and the Bureau. **OR** (b) PAHO should establish a			Frequent Financial reporting provided to Executive Management on Regular Budget funds, extra-budgetary funds, and all proprietary funds. Executive Committee members informed if cumulative month-end deficit exceeds $10 million and approval can be sought from Executive Committee for internal borrowing as appropriate. Timely information regarding the status of quota assessments and payments now provided. • The Project Support Unit (PPS/PS) established in

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	Programme Budget and Administration Committee as proposed by the WHO. 7.2. This Committee should conduct performance reviews in order to assess productivity, quality of service, efficiency and cost-effectiveness, as well as establish criteria for measuring impact, outcome and success of programmes in addition to expenditure review.			2004 reviews and certifies projects for submission to interested external partners. The PPS/PS review process ensures policy alignment; technical strategy, project design, managerial soundness and financial sustainability.
Governance	PAHO should formalize the links between financial reporting and effective evaluation through the simultaneous production of an evaluation report on the implementation of the programme budget and the financial report for the same programme budget period. 8.1.Agreed to Committee in 3.3.1. would perform this action.			
	PAHO should ensure that there is complimentarity in the programmes of the regional centers and country offices. 9.1.PAHO should design and implement the Regional Centres' programmes in consonance with the national programmes and those of the			Enhanced inter-programmatic collaboration in the Regional Office and increased use of joint missions to countries for greater effectiveness.

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	Country Offices to ensure uniformity in programming. 9.2.PAHO should ensure that the Regional Centres and Country Offices adopt an integrated approach and a shared agenda when programming to avoid duplication and to pool their resources toward addressing national needs, regional priorities and the achievement of global targets. 9.3.PAHO should evaluate and if necessary improve functions of the Pan American centers. 9.4.PAHO should evaluate and enhance the role of the WHO collaborating centers.			
Governance	PAHO should develop guidelines for the country offices to improve the relations with Ministries of Health as well as other institutions to promote a multi-sectoral approach to health development.			
	PAHO should develop an integrated national program in collaboration with the country which includes a definition of needs, policies and priorities of the country to facilitate more efficient, result oriented			• Systematic use of CCS as a tool for programming, involving all levels of the organization.

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	program planning and implementation.			
Governance	PAHO should undertake an evaluation to identify common problems and develop solutions across offices of international cooperation.			•
	PAHO should focus the management of its country programs on the WHO General Program of Work, national objectives and global targets. 14.1.PAHO should ensure that there is a new focus on programme management through: 1) Priority setting guided by the concept of utilitarianism. 2) Establishing and outlining criteria for identifying priorities. 3) Programming by objectives based on the World Health Organization General Programme of Work. 4) Setting priorities according to national objectives and global targets. 5) Integrating global targets contained within Millennium Declaration Goals into countries priorities and programmes to ensure that both the			• The commitment to the MDGs is contributing to the reorientation of the technical cooperation process, helping countries to develop multidisciplinary approaches to achieving the MDGs and other national goals.

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	national and global targets can be achieved. 6) Re-assessing targets and re-examining the need to shift PAHO's work from the process of measuring output to the process of measuring outcome (products). 7) Strategic budgeting/planning (3-5 years), which involves specifying the outcome (products) of work to be undertaken in the biennium and making outcome consistent with the priorities and budgetary provision for major programmes. Impact can be measured by utilizing this approach. Systematic monitoring of implementation, progress and expenditure, as well as evaluating relevance, efficiency and effectiveness. Where appropriate, assessing the impact of outcome must be conducted to measure and evaluate the success of programmes.			
Governance	PAHO should pursue a strategy to harmonize its policies and strategies with those of WHO to enhance the			• Improve harmonization of processes and synergy with WHO to achieve common objectives

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	relationship between the two organizations and generate opportunities to improve health in the region			• Better linkage between the Bureau's Expected Results and WHO's Global Expected Results • Budgeting structure based on Areas of Work (AOW) instead of Classified List of Programs. The Biennial Program Budget (BPB) 2006-2007 being developed within the framework of the PAHO Regional Budget Policy, approved by the 45th Directing Council. Ensuring new modalities in BPB planning and formulation to improve coordination with WHO, the Regional Office, Country Offices and Centers; improving transparency and enhancing quality and relevance of outcomes.
Governance	PAHO should decentralize some of its technical staff and resources from Headquarters to the country level in order to strengthen the performance of country offices, improve the use of PAHO's resources within countries and for the development of a more strategic approach to PAHO's cooperation with countries.			Increase rotation, decentralization and interagency movement of staff
Governance	PAHO should establish formal, transparent processes and systems for the transfer, exchange or hiring of national			

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	technical staff for cooperative activities. 18.1.PAHO should adopt more flexible employment contracts to ensure that the latest skills and knowledge are available for the work of the Organization. PAHO must ensure that the contract holders are not disadvantage with reference to social security coverage, salaries, allowances, termination indemnity and job security. The terms of the contractual arrangements for temporary appointments to project activities limited in time and/or funding must be clearly outlined and understood by all parties to avoid conflict and grievance in the organization.			
Governance	The Country Offices should be empowered with adequate financial and programmatic authority in responding to country needs. PAHO should review the level of responsibility that is delegated to PWRs and Centre Directors for efficient coordination of operations at the country level in harmony with the Plan of Work, which is developed by the Member States and Country Offices.			
Human Resources	PAHO should ensure that all	PAHO should maintain an	Regarding the WHO	Develop new standards for

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	staff maintain the highest level of skills and knowledge necessary to undertake their work. This should include appropriate training in all relevant areas. Furthermore, PAHO should keep Member States fully informed of it's human resources needs and strategy. 1.1.PAHO Secretariat should provide a detailed breakdown in the Biennial Program and Budget regarding specific staff training for particular priority areas. 1.2.PAHO should explore compiling a small team of experts on capacity building for particular priority areas that could be dispatched on an as-needed basis to countries or subregions to help in capacity building efforts at the national level. This should be done taking into account national experiences and existing capacities. 1.3.PAHO should develop a mechanism by which country office staff can receive short coursework or training in specialized areas to enhance their skills to better serve the	up-to-date list of accredited STCs/STPs, based on a clear policy for assessing their expertise, competence, and suitability for employment.	Fellowship program, the audit determined that selection of the candidates is uncertain, evaluation results of the individuals fellowships is weak, and the utilization of fellows on their return receives insufficient attention. PAHO should undertake a systematic review at each level and better integrate fellowships and an overall health and human resources perspective, as opposed to a stand-alone programme.	key human resources processes • Increase rotation, decentralization and interagency movement of staff Improve working environment and capability of the staff. • Match program needs and staff competencies - PAHO Competency Maps have been finalized - Learning Board created, led by the Assistant Director with members from across the organization, to define staff development priorities - Leadership and management competencies for supervisors have been particularly highlighted for staff development and learning activities, as well as strategic planning; knowledge

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	country they are assigned to. 1.4.PAHO should develop a strategy to better utilize or increase, if needed, the numbers of the organization's social communication experts, information management experts, and program managers. This may include providing training for existing PAHO technical experts in these areas. 1.5.PAHO should examine and begin to develop training paths for qualified individuals to continue their career development within the Organization 1.6.PAHO should produce and disseminate to Member States a biennial report on its Human Resource Strategy			management; networking and building partnerships; team leadership, performance assessment, and project management
	PAHO should evaluate its recruitment policy in order to address the geographical distribution inequalities in hiring staff from the region. This is to ensure that recruitment is not only in consonance with PAHO's Constitution and its Core Values but also that there is greater language and			

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	cultural diversity in the Organization as well as an equitable distribution of staff from Latin America, the Caribbean and North America. 17.1.PAHO should design a study to determine the factors inhibiting wider recruitment of nationals from all Sub-regions and mechanisms must be instituted to redress any geographical recruitment inequality. *(Note: this was in the Governance set of recommendations in the 21st C document, but it better fits with HR)*			
Human Resources	PAHO should develop a hiring policy, in line with WHO, that would help it achieve greater geographical and cultural diversity in its workforce. This hiring policy should work in tandem with Member States Human Resources policies to reinforce Human Resources capacities within the country. 2.1.PAHO should develop a more stringent policy for the hiring and evaluation of short-to-mid-term consultants. Such a policy should be widely disseminated among Member Countries 2.2.PAHO should encourage	All STCs/STPs should be recruited on the basis of open competition in all but the most exceptional circumstances. Candidates for short-term positions should be expected to abide by the Organization's ethical standards.		Implement a more targeted recruiting strategy

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	women to apply for positions within the Organization. It should undertake additional activity to actively recruit and retain women in professional and other senior positions. 2.3.PAHO should examine the situation of the "graying" of its workforce and strategically plan for workforce shortages that will occur during the coming years as professional staff retires. PAHO should produce an evaluation report and present it to Member States on a biennial basis. 2.4.PAHO should begin a discussion on ways to incorporate a tenure system that provides the benefits of stability while protecting against possible abuse. 2.5.PAHO, consistent with the review undertaken by WHO, should develop specific strategies to encourage nationals from underrepresented countries or regions to apply for positions within WHO/PAHO for equitable distribution. 2.6.The PAHO Secretariat should provide a detailed			

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	breakdown in the Biennial Program and Budget regarding hiring of staff. Specifically, this should include a breakdown of regular and contracted PAHO staff based in country offices and in Headquarters			
Human Resources	The profile of the individuals assigned to the country offices, as well as their training and experience, should be strictly consistent with the health needs, problems, and challenges identified and prioritized by the countries themselves, and take into account existing local capacity. When working in country, field staff, headquarters staff, and consultants should recognize that they will be working and coordinating with local human resources 3.1 In the selection/assignment for country level staff, PAHO should solicit country input early to achieve a more democratic or inclusive process. 3.2 PAHO should work with Member States to modify the core	PAHO should apply the same standards and considerations to internal appointments as apply to external recruitment and placement.		

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	competencies for a given position to specifically match the needs of that country. 3.3. PAHO staff should be sensitized to the cultural norms of the country in which they are working. 3.4. PAHO should make available to Members States the core competencies that have been developed by WHO/PAHO. 3.5. PAHO should also develop and circulate, if not already developed and widely circulated, core competencies for contract personnel (e.g., short- and medium-term consultants), against which the consultants will regularly be monitored and evaluated.			
Human Resources	Clear evaluation criteria and processes of PAHO staff (regular and contracted) should be disseminated to staff and Member States 4.1. PAHO Secretariat should make available to Member States the policy on how PAHO personnel are reviewed and evaluated.			

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	4.2. PAHO staff should be made aware of the core competencies that they are expected to maintain. Regular performance evaluations should be conducted and should examine the individual's ability to meet these competencies. 4.3. PAHO should review and strengthen its system for the monitoring and evaluation of contract personnel, which includes an evaluation of the contractor's ability to meet the required core competencies.			
Human Resources	PAHO must work with Member States to strengthen national health resources in a participatory and sustainable manner. This includes helping to build a solid base of health professionals at the country level, and helping countries to continuously educate these professionals to handle new and remerging public health issues. 5.1. PAHO should identify already existing country-based institutions renowned for excellence to form a regional/sub-regional network that will provide a base of			

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	highly skilled personnel in the various technical areas identified. PAHO should inform Members States of the resource available through the development of this network.			
Human Resources	PAHO should explore the development of an international health training program at the undergraduate level to generate interest and build future capacity in international health.			
	PAHO should explore developing relationship with universities in the region to develop and maintain the necessary expertise to face the coming challenges in the public health field.			
	PAHO should work with Member States to address the issues of migration of health professionals from the region to ensure the availability of necessary health professionals within each Member State and in the region. 8.1. PAHO should assist Member States in addressing issues of retention including training, accreditation, licensing, improvement of the working conditions.			
Science, Technology, Research, and Strategic	PAHO should stimulate and facilitate discussions in support		The audit noted several risks requiring attention	

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Supplies	of innovations in science, technology, research, strategic inputs and information to enable the development of national policies. 1.1.PAHO should create a mechanism to help Member States develop public policies directed to the production of technical knowledge and improve information sharing initiatives and integration among the countries involved with this area. 1.2.PAHO should support Member States in defining a selective agenda that establishes the priorities in the areas of scientific and technological research in health, such as the development of human resources.		related to the Expanded Programme on Immunization Revolving Fund for Vaccine Procurement: changes in suppliers affecting drug prices and availability; reorganization of the immunization unit; and new, more-expensive vaccines which may require an increase in the level of the fund.	
Science, Technology, Research, and Strategic Supplies	PAHO should promote activities and policies that will work to reduce the existing gap between the generation of knowledge and its application by decision makers. 2.1.PAHO should work with member states where applicable to improve dialogue between the national authorities and the national		The Audit noted the need to publicize the Regional Revolving Fund for Strategic Public Health Supplies, establish an effective revolving fund mechanism, and better link the fund to technical inputs	

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	science and technology authorities to reduce the gap and develop appropriate policies. 2.2.PAHO should facilitate the dissemination and publication of information for appropriate development of health policies.			
Science, Technology, Research, and Strategic Supplies	PAHO should support the development of national capacities for the generation of technology and production and procurement of supplies in order to guarantee accessibility			
	PAHO should promote the development of compatible and integrated information systems to improve health systems planning and assessment. 4.1.PAHO should strengthen the provision of technical assistance to Member States to develop and standardize their Health Information and Data Processing Systems (Health Human Resources Management, Drugs Management, Hospital Management, Laboratory Management, etc)			
	PAHO should support Member States in defining priorities in			

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	research that allows them to address the principle health problems and contribute to the establishment of alliances for their financing			
Science, Technology, Research, and Strategic Supplies	PAHO should develop and disseminate information and knowledge sources, in a cooperative manner, for countries and sub-regional groups, leading to increased equity of access to these sources.			
	PAHO should promote scientific knowledge and technological development and innovation of research and development, pharmaceuticals, diagnostic tools, medical equipment and other health supplies.			
	PAHO should support Member States in the development and implementation of measures at the national levels to comply with international agreements and policies in the related areas of science, technology and trade, in order to ensure access to drugs and health critical supplies.			
	PAHO should promote horizontal cooperation and			

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	exchange initiatives to increase national management skills in terms of research, access, production, distribution, dispensing, and rational use of drugs and health supplies.			
Science, Technology, Research, and Strategic Supplies	PAHO should foster the development and regional harmonization of clinical protocols and therapeutic guidelines to incorporate and utilise appropriate technology in health services.			
	PAHO should support Member States in the development of cooperative systems for the assessment of health technology			
Public Health Goods	PAHO should work with the Member States to facilitate the identification of public health measures needed by the countries of the Region, and which contribute to the attainment of the internationally agreed health-related goals set forth in the Millennium Declaration.			Strengthen capacity to support countries of the Region in anticipating and responding to global health issues and in influencing the global health agenda.
	PAHO should support the production, processing, and dissemination of information to ensure its high quality and accessibility to the countries and subregional blocs as a			

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	step toward helping the countries to develop policies to address health measures. [secure the public goods designated a priority in the national context]. 2.1.PAHO will contribute to the formulation and implementation of public health policy, through support for research in public health and health investment in the Region, and its link with economic, social, and human development.			
Public Health Goods	PAHO will support regional and international consensus building in health (at the different levels), based on the principles of equity and solidarity to achieve the highest attainable standards of health. 3.1.PAHO will provide support to Member States in the follow-up of the implementation of the commitments derived from regional and international consensus.			
	PAHO will facilitate and provide support mechanisms to help achieve economies of scale--for example, in the procurement of drugs, other strategic inputs, and health technology.			

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	4.1.PAHO will offer support to countries engaged in regional and international negotiations to achieve economies of scale.			
Public Health Goods	PAHO should support the regional and subregional economic studies that examine the social costs and the cost of regional and subregional interventions for diseases such as HIV/AIDS, malaria, dengue, Chagas'disease, tuberculosis, etc. 5.1.PAHO should estimate the knowledge, health service (technology, HR, financing), and international support needs which will help countries to achieve their strategic objectives.			
	PAHO should consolidate and expand evaluations and analyses of strategies employed to date for disease control and prevention, intensifying the exchange of information and experts at the regional and subregional level (including exchanges related to good practices, experts, etc.) and cooperating in the planning of joint activities among countries.			
	Recommendation: PAHO should identify priority			

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	countries by type of regional health problem, such as tuberculosis and malaria, so that the countries can interact more closely in a joint analysis of the situations, strategies employed, and new interventions. PAHO should strengthen the contribution of health to regional and subregional peace. 7.1. Intensification of regional exchange in the intersectoral interventions for violence prevention, with emphasis on modifying the principal health determinants: nutrition, education, housing, employment, environment, and mental health care models (primary mental health care).			
Public Health Goods	PAHO should help strengthen institutional capacity in the countries'ministries of health.			Support leadership role of ministries of health, network of mayors and municipal secretaries of health. Acting as secretariat and providing training for integration of various institutions and actors in the development of the national health agenda. Strengthening CCM, UN Theme groups, National commissions for MDGs, and other joint mechanisms.

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	PAHO should cooperate in the definition of regional and subregional needs in health, promoting the best use and advantages associated with the production and use of cost-effective interventions regional public goods and coordinating with other sectors, while at the same time reducing unnecessary trade barriers, creating incentives and credit and financing facilities, and monitoring and evaluating the processes.			
Public Health Goods	PAHO should cooperate in the identification of opportunities for health financing and interventions that respond to regional and subregional needs.			
Complaints Procedures/ Management Issues		PAHO should develop clear procedures for dealing with complaints and allegations, and it should communicate this to all staff. This should include a time-table for investigating the complaint and agreed procedure for communicating the outcome of the investigation.		• Review and update managerial principles and policies, procedures, guidelines and administrative process in Country Offices, Centers and Regional Office to adapt them to the changing needs of the Organization, including delegation of authority to Areas and Units with clear accountability

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		In the event that staff concerns cannot be resolved through their managers or supervisor, they should have access to a confidential hotline to raise their concerns. The investigation of matters raised via the hotline should be subject to supervision by an independent third party, able to report to the Directing Council.		
Complaints Procedures/ Management Issues		PAHO should have a clear policy for determining the circumstances in which complaints should be investigated and who should be involved; There should be clear protocols for the methodology used for the investigation and for the reporting of the outcome, and the Legal Dept. should be involved at all key stages.		
				• Review and update managerial principles and policies, procedures, guidelines and administrative process in Country Offices, Centers and Regional Office to adapt them to the changing needs of the Organization, including delegation of

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				authority to Areas and Units with clear accountability
				• Management systems being upgraded and enhanced to conform to rigorous standards. Inconsistencies in data from one system to another and duplicate data in multiple systems being eliminated
Ethical Standards		The ERC is drafting a Code of Conduct and recommendations for training PAHO staff on ethics and standards of conduct. This is expected to be ready by the time of the Directing Council		PAHO has proposed the introduction of modifications to the Staff Rules and Regulations to ensure the ethical notions and standards of conduct are fully reflected in the Staff Rules and Regulations.
Informational Technology and Security		PAHO has created an IT Security post, and selection is currently in its final stages.		Actions being taken to eliminate compartmentalization; strengthen cross-functional cooperation; improve teamwork; share information and knowledge. Policies for organization-wide IT Governance being developed. New Area created for Information and Knowledge Management.
				Implement a global

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				management system for planning and management of financial resources. The Bureau has new capacity to handle the daily upload of data through AMPES/OMIS–FAMIS. The system has improved the timeliness of available financial information for decision-making and increased the number of obligations initiated in AMPES/OMIS with links to the program of work
				• Virtual Collaborative Workspaces being created Sharepoint was identified as the appropriate platform to support cross-organizational teams, more efficient collaboration on preparing documents, and the consolidation of information and sharing of knowledge among groups of individuals, including external partners. PAHO outsourced its mainframe computer operations to the International Computing Center (ICC) in Geneva. The ICC is a consortium of 39 UN organizations.
Other Management				• PAHO-wide Workflow