

Opening Session

Decision Point 32-1

1. The Board adopts the proposed agenda for the 32nd Stop TB Partnership Board meeting.
2. The Board thanks the Government of Indonesia and the Stop TB Partnership Indonesia for hosting the Board in Jakarta and organizing the High-Level Meeting on Multi-Sectorial Synergy to End TB on 10 December 2019.
3. The Board welcomes the incoming Chair of the Board, Dr Luiz Henrique Mandetta, Minister of Health of the Federative Republic of Brazil, for a three-year term starting from December 2019.
4. The Board acknowledges and welcomes the following new Board Members for three-year terms:
 - a) Dr. Farhana Amanullah from Pakistan, representing the Implementation Working Groups of the Stop TB Partnership
 - b) Dr. Yousuke Kita, representing the Government of Japan and sharing a seat with
 - c) Ambassador Stéphanie Seydoux, representing the Government of France.



Dr Lucica Ditiu
Executive Director



Dr Joanne Carter
Vice-Chair

Report of the Executive Director

Decision Point 32-2

1. The Board welcomes the Report of the Executive Director and applauds the Executive Director and the Secretariat for their outstanding work in 2019.
2. The Board notes the progress made by the Secretariat in addressing and implementing the decision points from the 31st Board meeting.
3. The Board commends the valuable efforts to-date made by the Secretariat in the high-level advocacy efforts with heads of states and governments as well as ministers of health towards achieving the UN High-Level Meeting Political Declaration on TB targets, promoting scale-up of TB response, including increased diagnosis, preventive therapy, and roll-out of new tools.
4. The Board notes the progress made in achieving the KPIs for 2019 and looks forward to its final report at the 33rd Board meeting.
5. The Board commends the work done by the Secretariat and partners for the engagement of the TB community on the work around the successful Global Fund's Sixth Replenishment, UN High-Level Meeting on Universal Health Coverage as well as successful engagement with five heads of states and ministers of health and high-level dignitaries of 32 countries.



Dr Lucica Ditiu
Executive Director



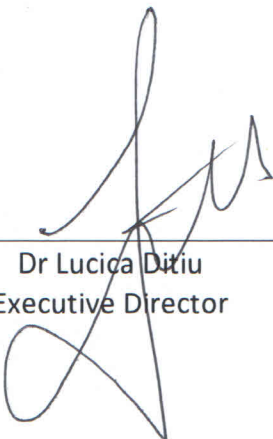
Dr Joanne Carter
Vice-Chair

Bridging the financial gaps in the TB response

Decision Point 32-3

1. The Board commends the increase in research and development (R&D) expenditures for TB in 2018 as highlighted in the “Tuberculosis Research Funding Trends, 2005-2018” report of the Treatment Action Group and the Stop TB Partnership. However, the Board recognizes the continued need to increase overall global investments for R&D for TB to USD 2.6 billion annually in order to meet the UN High-Level Meeting Political Declaration on TB target.
2. In line with the Board’s call to action at its 31st meeting on bridging the funding gap in TB, the Board requests the Secretariat, working with the Board leadership and partners, to proceed on pursuing near-term opportunities specifically related to:
 - Increasing domestic budgets for TB during the Global Fund’s country application process;
 - Increasing funding for TB through the Global Fund’s Portfolio Optimization process; and
 - Working with development banks on loan buy-downs in selected middle-income countries while taking into consideration their debt burden and ensuring a transparent and inclusive engagement of stakeholders, including but not limited to, ministries of health, civil society, and communities.
3. The Board welcomes, as presented by the Secretariat, the structure and process to convene the TB Finance Task Team and the next steps outlined for their work to identify traditional and innovative financing opportunities to bridge the financial gaps in the TB response.
4. The Board requests that the Secretariat ensure South-South cooperation and engagement of inter-agencies, experts, and partners in the TB Finance Task Team and their work, including but not limited to, social determinants for TB and social contracting mechanisms.
5. The Board encourages the Secretariat, working with the Board leadership, the TB Finance Task Team, and partners, to work towards incorporating the financial gaps in TB (including financing for community responses and systems where we have the widest gap) within the context of increasing domestic and external funding for the effective coverage of priority interventions toward achieving Universal Health Coverage (UHC).

6. The Board requests the Secretariat to work with the TB Finance Task Team and partners on identifying traditional and innovative financing opportunities to increase funding for TB within the context of UHC during 2020 and report back on the progress made at the Board's 33rd meeting.



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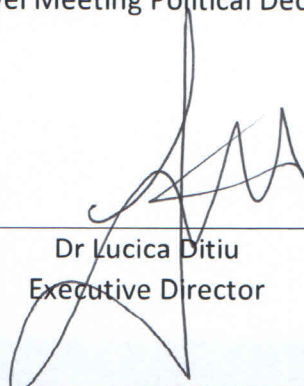


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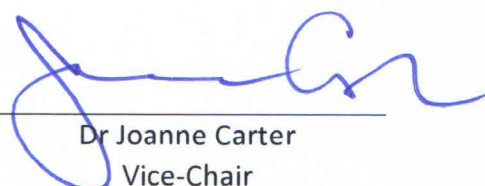
Updated Global Plan 2018-2022

Decision Point 32-4

1. The Board appreciates the work of the Global Plan Task Force led by Dr Paula Fujiwara, and all the members for their engagement in updating the Global Plan as requested by the Board at its 31st meeting.
2. The Board welcomes the statement of the Chair elect, Minister of Health of Brazil, Dr Luiz Henrique Mandetta.
3. The Board endorses the electronic approval of the *Global Plan to End TB 2018-2022* by the Executive Committee on 4 December 2019, and requests all constituencies and stakeholders to proactively promote and utilize the Global Plan.
4. The Board requests the Secretariat, under the guidance of the Executive Committee, to support and monitor the implementation and progress in achieving the funding targets of the Global Plan.
5. The Board recognizes that to deliver on its objectives, the Global Plan needs to be fully funded and implemented, and notes with concern that the current financial level of investments in TB should double for implementation and triple for research and development.
6. The Board recognises the work done by the New Tools Working Groups in updating the framework and the resource needs for R&D for new tools, and requests the secretariat to use it for advocacy for resource mobilisation.
7. The Board commends the Secretariat for developing country level indicative targets to meet the goals committed to in the UN High-Level Meeting's Political Declaration and the Sustainable Development Goals. The Board recommends that Secretariat coordinates with partners to support and advise countries and regional platforms/initiatives on achieving the TB treatment and prevention targets in the UN High-Level Meeting Political Declaration.



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Global Fund

Decision Point 32-5

1. The Board acknowledges the unprecedented and successful Global Fund's Sixth Replenishment and expresses thanks to the government of France for its leadership in hosting the replenishment and to all donors and partners for their support. The Board requests the Secretariat to work with countries to develop ambitious funding requests reflecting the full need to achieve the UN High-Level Meeting Political Declaration on TB targets.
2. The Board recommends that country TB programmes consider that the funding requests for the new allocation cycle should:
 - a. Ensure achievement of the UN High-Level Meeting Political Declaration on TB targets
 - b. Support a significant accelerated scale-up of the TB diagnostic network using new diagnostics, including rapid molecular technology
 - c. Adopt and implement all latest WHO guidelines on TB (especially the latest on DR-TB)
 - d. Roll-out evidence-based tools and innovative approaches, including from TB REACH projects, to find, diagnose and treat all people with TB, especially with the involvement of communities and private sector providers
3. The Board supports the proposed approach of the Secretariat working with the Global Fund, WHO, USAID and other partners in supporting country programmes to develop evidence-based and prioritized new applications. The Board requests countries to develop robust, ambitious above allocation requests.
4. The Board also notes the increased workload of country programmes in 2020 in order to close the current funding cycle and requests the Secretariat to work through the TB Situation Room and its partners to proactively support countries to fully utilize their current allocation. Special attention should be given to identifying procurement demand via GDF in a timely manner to plan medicines production toward meeting Global Fund end of grant deadlines.
5. The Board urges the Secretariat to work with the Global Fund, WHO, USAID, and other partners to ensure the success in finding the missing people with TB through the current cycle of the Global Fund Strategic Initiative is maintained and accelerated further with the addition of preventive therapy, particularly in high-burden countries in Africa and Asia. At its next Board meeting, the Board looks forward to be

presented a report about the progress in scaling up the diagnosis of people with TB that were missed in the African Region.

6. The Board asks the Secretariat to work with the Global Fund and partners to ensure that:
 - Catalytic funding for TB is well programmed for impact; and
 - Resilient and Sustainable Systems for Health and cross-cutting catalytic investments (including Data Strategic Initiative, CRG Strategic Initiative, Human Rights Matching Funds & Strategic Initiative, and other) fully support priority TB needs.
7. In the context of the development of the next Global Fund Strategy, in 2020, the Board urges the Global Fund Secretariat and Strategy Committee to adequately reflect the TB burden, the ambition of the UN High-Level Meeting Political Declaration on TB targets and necessary TB funding. The Board requests the Secretariat to ensure that the discussion on global disease split starts early and the TB community is well prepared for it.
8. The Board requests the Secretariat to support the active engagement of TB affected community and civil societies in the country processes, including country dialogue, funding proposal development, implementation, monitoring and evaluation with the aim of ensuring that the TB response is people centred, rights-based, gender-transformative and accessible to all in need. For this purpose, technical support should be planned and provided for community networks, civil society organizations and Country Coordinating Mechanisms, where needed.
9. In line with the Global Fund's Board recent decision to expand *Wambo* to non-Global Fund procurers for HIV and malaria products, the Stop TB Partnership Board recommends that pooled procurement of TB medicines and diagnostics continues to be conducted through GDF in order to promote uninterrupted access to TB products and to avoid further fragmentation of TB markets, as stated in the UN High-Level Meeting Political Declaration on TB.
10. The Board requests its leadership and the Secretariat to work with the Global Fund to develop an approach that is periodically reviewed whereby *Wambo* clients are directed to GDF's procurement system for TB medicines and diagnostics.



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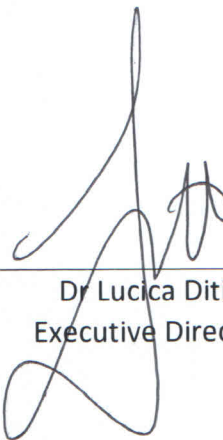
2020 UNSG TB Progress Report

Decision Point 32-6

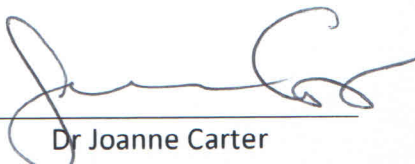
1. The Board recognizes the work done by the Secretariat in collaboration with partners by:
 - a. Unpacking the UN High-Level Meeting Political Declaration on TB commitments per country as indicative targets to be utilized in communication to high level stakeholders and utilize them for global advocacy.
 - b. Creating and deploying country profiles and scorecards based on the targets
 - c. Developing and expanding the Out-of-Step Report 2020 together with MSF
 - d. Supporting TAG to develop the TB R&D Financing landscape 2019 and 2020
 - e. Developing and rolling out the gender assessment, legal environment assessment and stigma assessment tools
 - f. Implementing the OneImpact community monitoring tool
2. The Board asks the Secretariat, working with partners, to further enhance the work on producing and sharing scorecards and profiles that reflect the progress towards TB commitments and targets from the UN High-Level Meeting Political Declaration.
3. The Board recommends that the findings generated by the above work should be shared with partners and WHO to be further considered for inclusion in the 2020 UNSG TB Progress Report as a valuable contribution to increase accountability at the national, regional, and global levels.
4. The Board recommends the Secretariat to work closely with WHO to help ensure that the 2020 UNSG TB Progress Report is developed in a transparent and inclusive manner, reflects the work done in 2018 and 2019 and maintains the same level of ambition and commitment as the UN High-Level Meeting Political Declaration on TB. The Board asks the Secretariat to ensure that, once the 2020 UNSG TB Progress Report is launched, key stakeholders and partners are informed and aware of the progress made and direct attention to the challenges that remain.
5. The Board requests the Secretariat to work with WHO to ensure that all UN High-Level Meeting Political Declaration on TB commitments and their associated per-country indicative targets are monitored and reported, including the target on

children with MDR-TB put on treatment for which no data exists in the WHO Global TB Reports.

6. The Board asks the Secretariat, working with WHO and partners, including affected communities and civil society to actively contribute to the monitoring, reporting, and review of country achievements to fully implement the Multi-sectoral Accountability Framework.
7. The Board recognizes the work of the Accountability track and recommends that this joint effort continues and is further strengthened as a TB community platform for the translation of commitments on accountability into actions.



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Civil Society and Communities

Decision Point 32-7

1. The Board recognizes the significant growth of TB affected community networks and civil society organizations in the TB response and the Secretariat role played in building strong and highly engaged networks at the national and regional levels.
2. The Board applauds the work done by the Secretariat in completing 12 legal environment assessments, 13 gender assessments as well as the work done to engage partners, media and celebrities at country level through national partnership platforms in 11 countries.
3. The Board applauds the launch of the Stigma Assessment Tool and welcomes it as a vital instrument for ending TB stigma in response to the UN High-Level Meeting political commitment, and requests the Secretariat to work with countries and partners on its roll-out, including through leveraging its inclusion in the Global Fund Modular Template for use in upcoming funding requests.
4. The Board acknowledges the extraordinary work demonstrated in the community, rights and gender area, endorses and supports efforts to mobilize funding as requested in the proposal presented by the three civil society constituencies, and the Board encourages possible funders to support the proposal.
5. The Board applauds the launch of the largest ever Challenge Facility for Civil Society (CFCS) call for proposals. The Board acknowledges the continued increased demand for support from local, community-based organizations in the TB response and appreciates the USAID Global Accelerator to End TB launched in 2018 and USAID's financial support to Challenge Facility for Civil Society mechanism.



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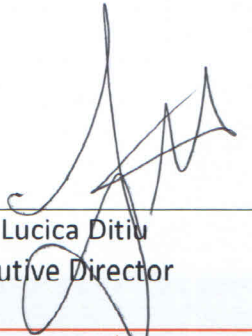


Dr Joanne Carter
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TB REACH

Decision Point 32-8

1. The Board applauds the critical contributions that Global Affairs Canada, USAID, and the Bill and Melinda Gates Foundation made to TB REACH to promote locally sourced innovations in the TB response and the progress towards sustaining successful approaches.
2. The Board recognizes the recent investments totalling USD 22 million in Wave 7 and Wave 6 for 46 grants and looks forward to seeing their results. The Board notes the TB REACH grants have impacted more than 2.6 million people with TB, and the majority of projects have increased case detection by more than 20%. In addition, multiple TB REACH innovations are being scaled-up through Global Fund, USAID, Unitaid, domestic and other donor resources.
3. The Board recognizes the importance and unique role TB REACH occupies as a specific platform providing support to programmatic innovation, including operational research, and uptake of new tools in the TB response; and acknowledges the role TB REACH played in supporting country programmes to reduce the TB detection and notification gap together with Global Fund's Catalytic Investments on TB, and the FIND.TREAT.ALL initiative, and towards achieving the UN High-Level Meeting Political Declaration on TB targets.
4. The Board supports the concept note for TB REACH 3.0 and calls for the Secretariat to engage with partners to further develop a strategic approach and refined focus for the next phase of funding. The Board supports a review of the governance structure to provide strategic guidance to the Secretariat, ensuring the representation of civil society and community.
5. The Board notes that the current funding for TB REACH ends in March 2021, the need to start a replenishment in 2020 to attract multiple donors, and calls for initiatives to secure its funding.



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Global Drug Facility

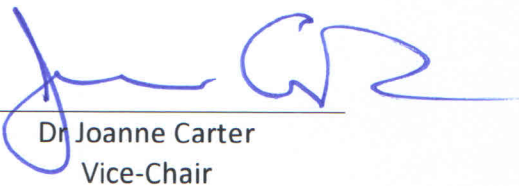
Decision Point 32-9

1. The Board recognizes the key role that the Stop TB Partnership's Global Drug Facility (GDF) plays in TB market stewardship and promoting access to affordable and quality-assured TB medicines and diagnostics.
2. The Board notes the recent progress made under the TB Procurement and Market-Shaping Action Team (TPMAT) that resulted in 60 changes to align medicine lists and priorities across the WHO Model Essential Medicines List, the WHO Prequalification Programme, the Global Fund Expert Review Panel, and the GDF Catalog.
3. The Board encourages all TB stakeholders to actively engage in and utilize the TPMAT as the main platform to identify and align on key TB market issues and develop coordinated approaches to address these issues.
4. The Board commends GDF's recent success in expediting equitable access to new medicines, most notably GDF's work with the Sentinel Project to expedite the introduction of new, child-friendly DR-TB formulations into 56 countries and the rapid scale-up of bedaquiline across >80 countries at the end of the USAID-Janssen donation program.
5. The Board recognizes GDF's strategic positioning and existing infrastructure that enable GDF to facilitate and expedite new tool introduction with minimal added costs; and, encourages all donors, partners, and country programmes to utilize GDF as the preferred procurement mechanism to introduce new TB medicines and diagnostics as encouraged by the UN High-Level Meeting Political Declaration on TB.
6. The Board notes with concern the market and access challenges challenges (e.g., failed tenders, high prices, procurement of non-quality assured and/or, non-WHO recommended products, medicine stockouts, etc.) that may arise as National TB Programs move towards domestic procurement of TB medicines and diagnostics. The Board recognizes the multipronged approach of GDF to address these challenges and better position itself to support National TB Programs and encourages countries to use GDF for domestic procurement of quality-assured, affordable TB medicines and diagnostics. The Board requests GDF to work closely with global and national civil society platforms to establish and lead a task force under the TPMAT to assess the risks associated with domestic procurement, identify interventions to address these risks, and report back to the Board at the next Board meeting.

7. The Board notes the Secretariat's initiative to establish and convene the ProCureTB Network to be comprised of key stakeholders from selected countries with high burdens of TB with aims to: coordinate timing of orders to suppliers; share information on price, availability, and product quality issues; and, ultimately develop global demand forecasts.



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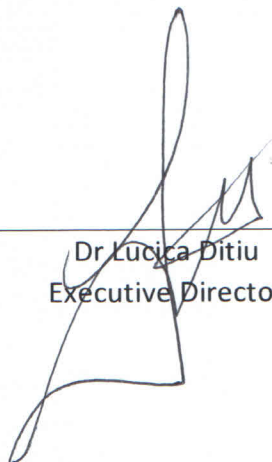
Hosting Arrangement

Decision Point 32-10

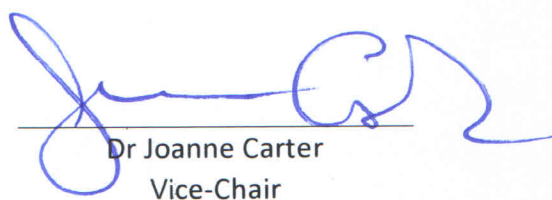
1. The Board:
 - a. Notes the decision by UNOPS to terminate the arrangements for hosting the Secretariat;
 - b. Is disappointed that efforts by the Secretariat and Board Members to establish dialogue and seek resolution with UNOPS' leadership were unsuccessful; and
 - c. Acknowledges that the unexpected circumstances have necessitated planning and preparations for transitioning the Secretariat from its current hosting arrangement.
2. Accordingly, the Board:
 - a. Decides to proceed with transitioning the Secretariat from its current hosting arrangement by the target date of 30 June 2021 in a smooth, orderly and timely manner that avoids disruption and continues the critical work for the people and communities the Stop TB Partnership serves;
 - b. Decides to update the Ottawa Principles adopted under Decision Point 23-10, as amended and set forth below (the "Ottawa-Jakarta Principles"), to serve as the Stop TB Partnership's requirements for a future hosting arrangement:
 - i. Board authority to make decisions on the Stop TB Partnership's strategic direction as well as human and financial resources against the strategy, to be implemented by the Secretariat;
 - ii. Board authority to determine and implement the strategic approach and operational mechanisms used for programmatic implementation, which includes the procurement of TB medicines and diagnostics;
 - iii. Board authority for oversight and performance assessment of the Executive Director including decision-making on hiring and termination;

- iv. A clear identity and mandate for the Stop TB Partnership that is distinct and recognizable to all stakeholders with the independence to deliver credibly and effectively on its mandate;
 - v. Ability of the Board, directly and through the Secretariat, to communicate with its partners, including the ability of the Chair and Vice Chair of the Board as well as the Executive Director to engage and dialogue with Heads of State, Ministers and other leaders, influencers or governing bodies, without restriction or separate approval;
 - vi. Board authority, directly and through the Secretariat, to issue public statements or publish materials (e.g., reports, papers, briefs, advocacy campaigns) without restriction or separate approval;
 - vii. Efficient, flexible, quality and accountable administrative and financial processes to enable the Secretariat to implement board decisions expeditiously and in the full spirit of those board decisions;
 - viii. Flexibility to attract a diverse set of donor resources and to utilize a diverse set of models for partnership and collaboration to support the Secretariat and activities, including with communities, civil society and the private sector;
- c. Delegates to the Executive Committee, in consultation with the Finance Committee, oversight of the transition process, including:
- i. Commissioning an independent hosting review to assess options against the Ottawa-Jakarta Principles and any additional criteria that may be approved by the Executive Committee;
 - ii. Presenting a recommendation on the future arrangement with a transition budget and implementation plan to the Board for approval by November 2020;
 - iii. Reviewing financial implications of the transition and determining appropriate means for addressing or managing them;
 - iv. Monitoring progress against planned milestones and timelines as well as associated risks or interdependencies;
 - v. Providing direction on actions to execute the transition;
 - vi. Developing the scope and timing for updates to the Board on the transition process; and

- d. Emphasizes that support, collaboration and cooperation from UNOPS remains imperative for a smooth, orderly and timely transition.



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Executive Director

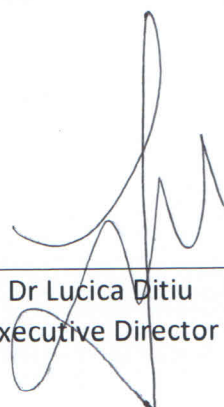


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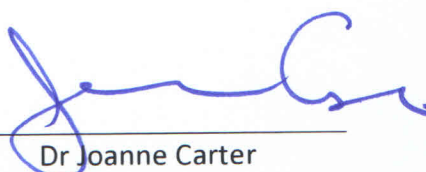
Secretariat Budget 2020

Decision Point 32-11

1. The Board thanks and recognizes the work of the Finance Committee, the Secretariat as well as UNOPS Project Management Team, and directs the Finance Committee to continue to monitor expenditures, encumbrances and financial risks, and alert the Executive Committee of any concerns.
2. Based on the high-level budget for the biennium 2019-2020 approved by the Executive Committee in December 2018 and endorsed by the Board during the Board Meeting in Geneva, in January 2019, the Secretariat prepared the detailed budget for 2020. Based on the recommendation of the Finance Committee, the Board approves the detailed budget for the year 2020.
3. Based on the recommendation of the Finance Committee, the Board endorses the Stop TB Partnership 2018 Annual Financial Management Report.
4. The Finance Committee reviewed the updated Flexible Procurement Fund (FPF) Operating Principles in July 2019 that increased the amount of funding available to FPF from \$4,700,000 to \$6,560,000 to broaden the scope to include diagnostics; amended the list of countries; and updated the procedure to access the FPF. Based on the recommendation of the Finance Committee, the Board endorses the revised FPF Operating Principles.
5. The Board requests the Secretariat to work under the guidance of Finance and Executive Committees on the financial matters to be considered when transitioning the Partnership to a new host.



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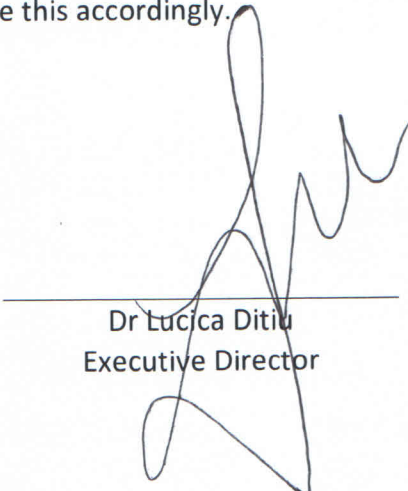


Dr Joanne Carter
Vice-Chair

Stop TB Board Governance

Decision Point 32-12

1. The Board expresses its sincere appreciation to Minister Aaron Motsoaledi for his leadership as Chair of the Board and unsparing championship for the cause of TB. Over his tenure as Chairperson, the Minister devoted his personal commitment, experience and energy to the work of the Stop TB Partnership Secretariat and the TB Community as a whole. His vision and engagement made the United Nations High-Level Meeting Political Declaration on TB a reality, and under his leadership, the TB Community and Stop TB Partnership increased visibility, identity and gained an important role in the global health arena. The Board bestows upon him the honorary title of Chair Emeritus of the Board.
2. Following the recommendation of the Executive Committee, the Board approves:
 - i. the extension of the terms of the Board Members that represent the three civil society constituencies (TB Affected Communities, Developing Country NGO, Developed Country NGO) through the 33rd Board Meeting;
 - ii. the extension of the term of the Vice-Chair through 34th Board meeting.
3. The Board welcomes the invitation of H.E. Minister of Health of Nigeria and agrees to hold its 33rd Board meeting in Abuja. The Board asks the Secretariat to initiate communications with the Government of Nigeria to explore the details of hosting the 33rd Board meeting; and to continue working with the Executive Committee to finalize this accordingly.



Dr Lucica Ditiu
Executive Director



Dr Joanne Carter
Vice-Chair