

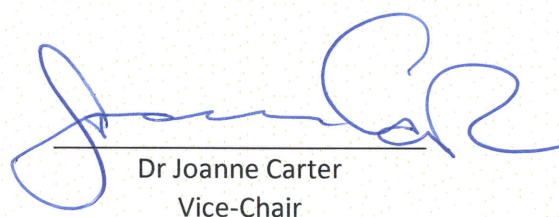
## Opening Session

### Decision Point 30-1

1. The Board adopts the proposed agenda for the 30th Stop TB Partnership Board meeting.
2. The Board notes the progress on addressing the decision points from the 29th Stop TB Partnership Board meeting.
3. The Board welcomes the appointment of Mrs. Angela Specht from Johnson & Johnson, and Mr. David Cohen from the Bill & Melinda Gates Foundation as new members of the Finance Committee for a term of three years.



Dr Lucica Ditiu  
Executive Director



Dr Joanne Carter  
Vice-Chair

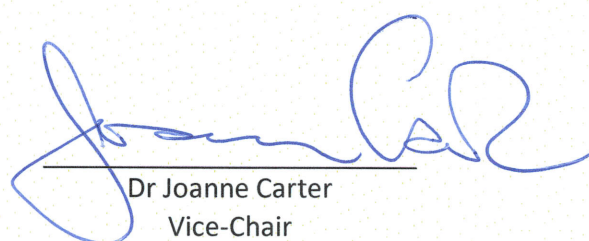
## Address by His Excellency the Minister of Health of India

### Decision Point 30-2

1. The Board thanks His Excellency, Narendra Damodardas Modi, the Prime Minister of India and the Government of India for leading globally towards ending tuberculosis (TB), and for raising the political profile of TB nationally and regionally, and for holding the Delhi End TB Summit in preparation for the High-Level Meeting of the UN General Assembly (UNHLM) on TB in September 2018.
2. The Board sincerely thanks His Excellency, Shri Jagat Prakash Nadda, Minister of Health and Family Welfare of India for his vision and commitment toward ending TB in India through the implementation of an ambitious national budget and plan. We look forward to India's continued close collaboration with the Stop TB Partnership.
3. The Board also wishes to thank the Government of India for hosting this Board meeting and for the support offered by the city of New Delhi.



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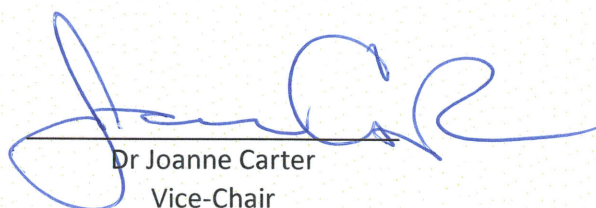
## Report of the Executive Director

### Decision Point 30-3

1. The Board welcomes the report of the Executive Director and thanks the Executive Director and the Secretariat team for their tremendous work and achievements over the last 10 months. The Board thanks the Secretariat for the work done to ensure a higher profile for TB globally, and for its support of preparations and groundwork for the 2018 UN High-Level Meeting on TB working closely with partners.
2. The Board thanks and appreciates UNOPS for their continued support and engagement.
3. The Board also commends the successful efforts carried out with the Government of India and WHO Regional Office for South East Asia in organizing the Delhi End TB Summit on 13 March 2018, and applauds the commitments made by the participating countries.



Dr Lucida Ditiu  
Executive Director



Dr Joanne Carter  
Vice-Chair

## Stop TB & WHO

### Joint Initiative to Diagnose and Treat 40 million with TB by 2023

#### Decision Point 30-4

1. The Board welcomes the recently appointed Deputy Director-General for Programmes at WHO, Dr Soumya Swaminathan, and the new WHO Director of the Global TB Programme, Dr Tereza Kasaeva. The Board looks forward to enhanced collaboration and joint work with the World Health Organization at global, regional and country levels.
2. The Board recognizes and appreciates the renewed collaboration, and the increased impact to be achieved through coordinated and joint efforts between WHO and Stop TB Partnership.
3. The Board congratulates Stop TB Partnership Secretariat and WHO on launching a joint initiative to support countries to find, diagnose and treat 40 million people with TB by 2023. This target is fully aligned with the targets of the WHO End TB Strategy, the Stop TB Partnership Global Plan to End TB 2016-2020, and the Sustainable Development Goals. All governments and partners are called on to make concrete commitments in line with the target, in advance of the UN High-Level Meeting on TB.
4. An update on progress countries have made toward reaching the target will be presented at subsequent Board meetings.



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Executive Director



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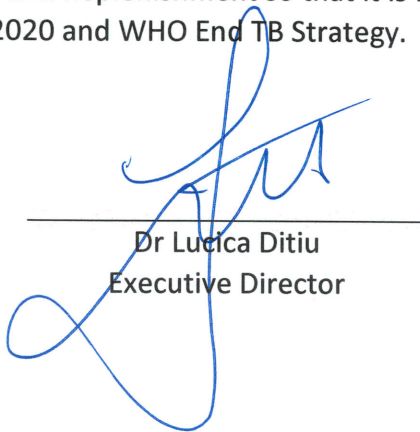
Dr Joanne Carter  
Vice-Chair

## Global Fund

### Decision Point 30-5

1. The Board welcomes Mr. Peter Sands, the new Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria, and thanks him for his commitment to further increasing Global Fund focus on accelerating efforts to end TB.
2. The Board acknowledges the Global Fund for its critical role in supporting countries to strengthen their response to TB and asks the Secretariat and partners to work with Global Fund to further increase the efficiency and impact of investments.
3. The Board notes the ambitious targets and critical investment to reach an additional 1.5 million people with TB annually by 2019, driven mainly by countries in Asia, through the Global Fund's Strategic Initiative. The Board notes the wealth of knowledge and experience in several initiatives, such as TB REACH, that can help countries to meet these ambitious targets. The Board requests that the Secretariat provide regular updates on the initiative.
4. Recognizing that TB is the world's number one infectious killer, the Secretariat should work with the Global Fund to explore ways to increase resources for TB.
5. The Board asks the Secretariat to continue to work with the Global Fund and partners to support countries to fully utilize their allocations for maximum impact. The Board also requests the TB Situation Room partners to work with countries to identify programs that would benefit most from funding made available through Global Fund portfolio optimization.

6. The Board requests the Stop TB Partnership Secretariat to work with the Global Fund Secretariat and partners towards developing the investment case for the next Global Fund Replenishment so that it is fully aligned with the Global Plan to End TB 2016-2020 and WHO End TB Strategy.



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Executive Director



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Dr Joanne Carter  
Vice-Chair

## From Moscow via Delhi to New York The Path to the UN High Level Meeting (UNHLM) on TB

### Decision Point 30-6

1. The Board congratulates the Government of the Russian Federation and WHO for the organization of the successful 'Global Ministerial Conference: Ending tuberculosis in the SDG era: A multisectoral response' and the adoption of the Moscow Declaration.
2. The Board notes the Modalities Resolution for the UNHLM on TB, congratulates the Member States and thanks the two co-facilitators representing Antigua and Barbuda and Japan for the work done to ensure a comprehensive and strong resolution.
3. The Board commends the work of the Coordinating Group for the UNHLM on TB and the associated work tracks, the Stop TB Secretariat, the WHO, and multiple partners including the UN Special Envoy for TB, the Global TB Caucus, TB HLM Affected Communities and Civil Society Advisory Panel that are working towards ensuring that Member States are supported to make the UNHLM on TB a success.
4. The Board requests the Coordinating Group facilitated by the Secretariat, and the work tracks to continue their work to ensure a strategic and coordinated approach through end September 2018 and to assess what will be needed to support follow-up from the UNHLM on TB.
5. The Board welcomes the presentation of "Ending the tuberculosis epidemic: Key Asks for Heads of State and Government":
  - i. Reach all people by closing the gaps on TB diagnosis, treatment, and prevention
  - ii. Transform the TB response to be equitable, rights-based, and people-centered
  - iii. Accelerate development of essential new tools to end TB
  - iv. Invest the funds necessary to end TB
  - v. Commit to decisive and accountable global leadership, including regular UN reporting and review

and the outline of the strategy for accountability, and requests the Coordinating Group and the partners engaged in this work to further advance these documents, through open and transparent consultations and engagement with a wide range of partners.

6. The Board strongly encourages that the voice of civil society and affected communities be prioritized at the interactive civil society hearing. The Board requests the Secretariat to contribute financial support for the civil society hearing, to be held in advance of the UNHLM, as well as for the engagement of civil society and affected communities in the UNHLM on TB.
7. The Board urges all Board members and partners to work with their networks to ensure through all means possible that Heads of State and Heads of Government attend the UNHLM on TB. The Board also strongly encourages Board members to attend the civil society hearing to be held in New York in advance of the UNHLM on TB.
8. The Board appreciates the work of the Lancet Commission and its plans for analyzing and providing recommendations for accelerating the progress in TB prevention and care.



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Executive Director



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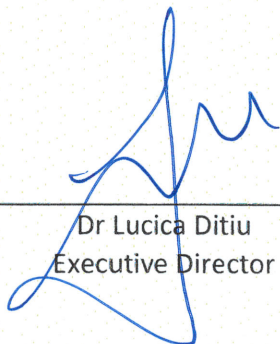
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Vice-Chair



## Zero TB Cities Initiative

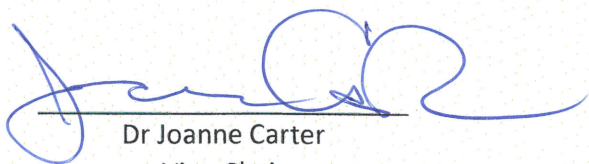
### Decision Point 30-7

1. The Board notes and appreciates the innovative and ambitious concept of the Zero TB Cities Initiative, the strategic partnership among Stop TB Partnership, Partners in Health, Interactive Research Development Pakistan, Advance Access Delivery, Harvard Medical School/Center for Global Health Delivery-Dubai, and local municipal authorities, and the progress to-date in a number of cities.
2. The Board acknowledges that a comprehensive epidemic-control strategy (including active case finding, treatment of all forms of TB, treatment of TB infection and support to people with TB) will move us more rapidly towards ending TB.
3. The Board recommends that the experiences and lessons learned from these Zero TB Cities Initiative are disseminated widely, and the Board is regularly updated on the progress and opportunities.



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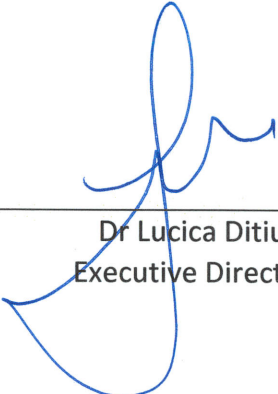
Dr Joanne Carter  
Vice-Chair

## Private Health Sector Engagement

### Decision Point 30-8

1. The Board thanks the Stop TB Private-Public Mix (PPM) Working Group for its work, including the contribution of WHO, which serve as the Secretariat of the Working Group.
2. The Board applauds India's recent progress in this area, where India has demonstrated a novel, scalable model for private provider engagement. The Board welcomes the political commitment and leadership by the Indian government to scale-up this model nationwide, as part of the National Strategic Plan for TB Elimination.
3. The Board calls on all countries where large numbers of people seek care in the private health sector to be ambitious and set priority targets for engagement of private health providers and notification of people with TB seeking care in the private sector to ensure accurate national reporting and adherence to national treatment standards.
4. The Board encourages the PPM Working Group & WHO to publish and disseminate best practices for private sector engagement, and develop targets and indicators for monitoring scale-up of private sector engagement, at the national and global level. Given the critical importance of public-private mix in the context of reaching the missing people with TB, the Board requests an update on progress at the next Board meeting.
5. The Board recommends strengthening civil society and community involvement in the private-private collaboration work of PPM in bridging the gaps between people with TB and healthcare and social service providers, as well as in active case finding, notification, and in raising public awareness.

6. The Board recognizes the innovative work in private sector engagement supported by TB REACH and thanks USAID for the significant contribution made to TB REACH to fund approaches to engage the private sector in wave 6.



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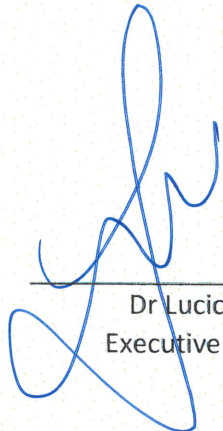
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Dr Joanne Carter  
Vice-Chair

## The urgent need for global investment in TB vaccines to eradicate TB

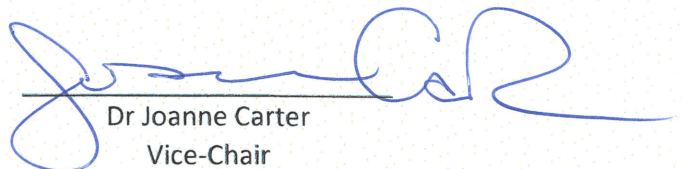
### Decision Point 30-9

1. The Board recognizes the essential role that a TB vaccine will play in the eradication of TB, and acknowledges the important progress that has been achieved.
2. The Board recognizes the importance of increased and sustained funding for the development, evaluation, and implementation of vaccines designed to prevent TB. The Board encourages increased commitments to R&D, including vaccines, as one of the key priorities for Heads of States to take up at the UNHLM onTB.



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Executive Director



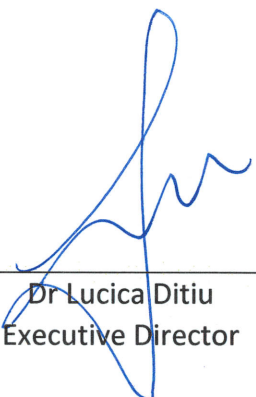
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## Ensuring Access and Quality of TB Medicines & Diagnostics


### Decision Point 30-10

1. The Board acknowledges the need for a comprehensive strategy to assess the implication of Global Fund co-financing and transition on access to quality TB care, including impact on access to and markets for affordable quality-assured TB medicines and diagnostics, with an aim of providing a mechanism to urgently identify issues, assess risks, develop recommendations for addressing them, and facilitate information sharing across all stakeholders.



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## Unitaid Investments in Tuberculosis

### Decision Point 30-11

1. The Stop TB Board welcomes the engagement of the Unitaid Secretariat with the Stop TB Partnership Secretariat and the broader TB community, and recognizes the important role Unitaid has played and can play in bringing needed innovations to people and facilitating access to health products in countries.
2. The Board notes Unitaid's strategy and investments in TB health product innovation, recognizes Unitaid's longstanding commitment to TB, and previous grants to fund targeted, catalytic interventions in TB, and notes that much more can and should be done.
3. The Board strongly supports Unitaid's intention of funding further work in TB, and supports the consultative approach Unitaid is undertaking to inform and craft clear priorities for its future investments. The Board urges an expedited timeline for development of a new call for TB proposals, and calls for the commitment of Board members to provide and encourage input into Unitaid's consultation by 20 April 2018.
4. The Board supports Unitaid to launch a new call for TB proposals in advance of the UNHLM on TB. The Board calls on the Stop TB Secretariat and partners to support the development of strong, strategically focused TB proposals for Unitaid.



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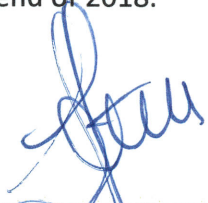
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Vice-Chair

## Report from the Finance Committee

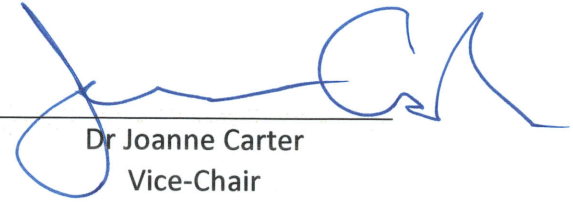
### Decision Point 30-12

1. The Board thanks and acknowledges the work of the Finance Committee and the Secretariat's Finance Team and UNOPS Project Management Team.
2. The Board requests the Finance Committee to continue to monitor expenditures, encumbrances, currency exchange and financial risk, and alert the Executive Committee of any changes.
3. Based on the recommendations of the Finance Committee, the Board approves the following:
  - a) The acknowledgement of the Global Drug Facility (GDF) assets and revenues of US\$ 8,723,195, the adoption of general principles and process for using GDF assets and revenue, and the urgent approval to include First Line Drugs in the Strategic Rotating Stockpile for a value of no more than US\$ 3million.
  - b) The acknowledgement of non-GDF un-earmarked funds of US\$2,876,534, the adoption of general principles and process for using these un-earmarked funds, and the approval to use US\$850,000 of these funds for the Partnership's Statutory Reserve (from current level of US\$1.7M to US\$2.55M).
4. The Board agrees to maintain the current investment arrangement as part of UNOPS Working Capital Portfolio.
5. The Board asks for a high level budget for the biennium 2019-2020 to be prepared by the Secretariat in Q4 2018 and submitted to the Board for approval. The detailed budget for 2019 shall be prepared and submitted to the Executive Committee for approval by end of 2018.



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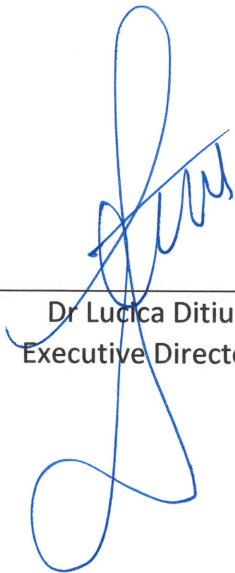
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Vice-Chair

## Stop TB Board Meeting Venues & Closing

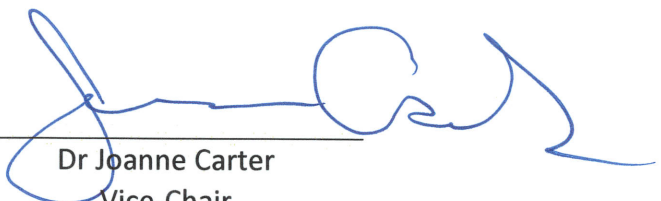
### Decision Point 30-13

1. The Board thanks the Ministry of Health and Family Welfare and the Government of India for hosting the 30<sup>th</sup> Stop TB Partnership Board meeting. The Board agrees to hold its 31<sup>st</sup> Board meeting in Q4 2018.
2. Following the recommendation of the Executive Committee, the Board asks the Secretariat to initiate communications with the Government of Switzerland to explore the possibility of holding the 31<sup>st</sup> Board meeting in Geneva and to continue working with the Executive Committee to finalize plans.



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Executive Director



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