## CSC meeting on Feb 5<sup>th</sup>

 Programme's 2021workplans : AMR, GHD, ITH, MH, NCDs, RS

 Results of the funding dialogue 2021 (presented by WHO, for information)

 Proposal for process to develop CCS 2022-2026 (presented by WHO, followed by discussion)

# Highlights of programme workplans for 2021

	AMR	GHD	ITH	МН	NCDs	RS
Knowledge/Evidence generation, synthesis, management	<b>√</b>	$\sqrt{}$	$\sqrt{}$	$\checkmark$	$\sqrt{}$	$\sqrt{}$
Knowledge communication, Public awareness	<b>√</b>	V	$\sqrt{}$	$\sqrt{}$	V	$\sqrt{}$
Policy advocacy	V	*	V	V	V	V
Human/Institutional capital: Capacity building	V	V	V	V	V	V
Social capital: Networking, Multistakeholder coordination	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$

## Results of the funding dialogue 2021

Total funds: 55.5 million

Gaps were filled, except Road Safety Programme

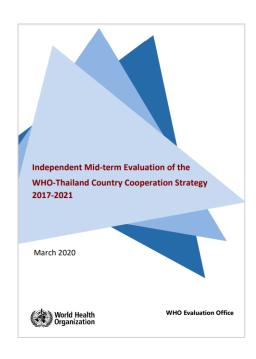
Principles of pool-funding were achieved;
Thai Health (41.4%), WHO (28.8%), NHSO (20.7%), HSRI (7.2%), NHCO (1.8%), MoPH (0.0%)

#### Recommendations from the CSC

On the *Evaluation* of the current CCS 2017-21

There is consensus on the need for the final evaluation

 However, given that a midterm evaluation was recently carried out in 2019, a lighter final evaluation was proposed.



#### Recommendations from the CSC

On the *Proposal for the development* of the new CCS

There is consensus on boarder principles and development process

For endorsement of ex com