

Leadership Team Meeting**October 2, 2019****Participants****Leadership team members and guests**

- Bill Simmons (Chair), President & CEO, American Leprosy Missions
- Geoff Warne, CEO, International Federation of Anti-Leprosy Associations (ILEP)
- Takahiro Nanri, Executive Director, Sasakawa Health Foundation
- Mark Alexandre Rogers, Novartis
- Bart Vander Plaetse, Deputy Director FAIRMED; member of ILEP ITC (Chair, Operational Excellence working group)

Secretariat

- Courtenay Dusenbury, Secretariat Director, Global Partnership for Zero Leprosy
- Jessica Cook, Communications Director, Global Partnership for Zero Leprosy
- Christine Fenenga, Operational Excellence Coordinator, Global Partnership for Zero Leprosy
- Andie Tucker, Communications Specialist, Global Partnership for Zero Leprosy

Invited but unable to attend

- Benedict Quao, Program Manager, National Leprosy Elimination Program of Ghana
- Jan van Berkel, Chair, Executive Group, Leprosy Research Initiative
- Roch Christian Johnson, President, International Leprosy Association (ILA)
- Zaahira Gani, Project Manager, Novartis Foundation
- W. Cairns Smith, Emeritus Professor of Public Health, University of Aberdeen
- Erwin Cooreman, Team Leader, WHO Global Leprosy Programme (observer)
- José Ramirez, President, International Association for Integration, Dignity and Economic Advancement (IDEA)
- Anil Kumar, Deputy Director General (Leprosy), Ministry of Health and Family Welfare, Government of India
- Alice Cruz, UN Special Rapporteur (observer)

I. Welcome from Leadership Team Chair Bill Simmons**II. Communications Update: Andie Tucker and Jessica Cook**

- ILC: ILC was a success for GPZL's communications and member engagement. We saw bumps in social media engagement, website traffic, and membership applications. The website had more visitors during the week of ILC than ever before, the toolkit being the most popular page on the website right now, our follower counts increased on Facebook and Twitter, with our Twitter account reaching about 25 thousand people last month between the two conferences. We also saw a big bump in newsletter sign ups and membership sign ups. We've had 32 entities sign up for membership since the congress. We're thinking at the Secretariat about membership engagement and how we involve those new members and reinvigorated current members.
- NNN: NNN brought together about 400 people, representing a very diverse crowd from 50 countries. NNN is an opportunity to explore issues across different diseases. Leprosy was well represented during the plenary and conference workshops, especially by people impacted by leprosy. ILEP and GPZL hosted a table, and ALM's NTD innovation prize was announced at this conference, which helped to make leprosy more visible at NNN. Dr. Rabindra presented findings from the Nepal review, Erwin also gave a presentation, and Christine followed up with a presentation. These sessions helped to bring more awareness of the partnership. Geoff represented the GPZL on a panel on partnerships that helped to bring more visibility to GPZL. A meeting with Mwele Malecela did not take place, but Geoff Warne will visit her soon.

III Research Agenda Update: Courtenay Dusenbury

- The paper is completed. We sent it to Paul Saunderson, David Addiss, and Fareed Mirza for comment. David and Fareed have been named in the acknowledgements so we wanted them to review the paper.

IV Governance update: Courtenay Dusenbury

- Vice Chair for Partnership: An idea to add a Vice Chair for global partnership and advocacy was discussed during the Manila meeting. Draft language on this proposed position was sent to the LT along with a copy of the current charter.

Proposed Amendment to the GPZL Charter, Vice Chair: *The Vice Chair will serve as the strategic lead for global advocacy and partnerships. In the absence of the Chair, the Vice-Chair will chair Leadership Team meetings. He/she will serve in his/her own capacity, not as a representative of his/her organization. He/she will have substantial experience in developing positive relationships and partnerships with international foundations, governments, the private sector and non-profit organizations. The Leadership Team will appoint a Vice Chair for a one-year term, from November 1, 2019 to November 1, 2020. From December 2020 onward, candidates will be self-nominated, reviewed by the leadership team and selected for a term of two years, renewable once.*

- We're proposing that the leadership team appoint this individual for a one-year term. After that the position will be open and leadership team members can nominate themselves for this position.
 - Bill: We all are excited about the possibility of Taka serving in this role. Are there any amendments to the language proposed?
 - Geoff: Is there a space for the leadership team to nominate someone other than themselves?
 - Bill: Yes.
 - *Consensus approval for the appointment of Taka Nanri to the new position of Vice Chair.*
- Representative from Brazil: We have been struggling finding a Brazilian representative. Mauricio is interested in returning to the leadership team. This has been strongly supported by the national leprosy program director. We're asking the leadership team if they approve him rejoining the board. We can put this forward to the full leadership team in an email vote.
 - Bill: This is great. Mauricio is committed and brings clinical expertise, which is so valuable to the leadership team.
- Focal point(s) for priority areas: PEP, Diagnostics, Stigma and modeling: We discussed in the meeting in Manila that we want to make sure we're using a model that's pushing technical experience outward so the secretariat doesn't get too big. We want to establish working groups on each of these topics. These groups would develop protocols and specific ideas we can use to raise funds. NLR is taking the lead on PEP and stigma. ALM in partnership with Novartis has offered to coordinate diagnostics. We are still in need of an organization or person to lead economic modeling.
 - Bill: I suggested that Dr. Sundeep Chaitanya who heads our innovation lab at Cambridge would be the point person for diagnostics. I am confident that he can carry the main agenda points forward for GPZL.

- Mark: I think it's great to have Sundeep to run point. We will be happy to provide support.
- Courtenay: Who should we approach about economic modeling?
- Bill: David Blok would be an important part of this. Should we invite him?
- Courtenay: I want to make sure everyone is comfortable with David.
- Mark: We have a group in Novartis Social Business that does evaluation. We don't want to lead the economic modeling effort, but we could help.
- Geoff: As I understand it, the purpose of doing that is to build a strong case for investment. I don't know anyone that's particularly strong in this area.
- Mark: I will reach out internally to try to better understand our capabilities and then get back to you.
- Courtenay: Another thing we haven't talked about is trying to improve leprosy DALYs. We'll follow up with the leadership team on this to make sure everyone is comfortable with this approach and then assist these groups with coordination moving forward.
- Christine: Anuj might be a good addition to this.

V. Resource Mobilization/Partnership Update: Courtenay Dusenbury

- Action Framework: Our discussion about this in Manila will be turned into two versions of the framework. One for the Leadership Team and secretariat, and then another simpler version that can be shared externally. It will show in a clear and simple way what the partnership will do. Novartis will host an implementation meeting to help us operationalize this framework in early December between the 4th and the 12th. We're determining what the outcomes of that meeting should be and who should attend. Both Erwin and Dr. Pemmaraju have hit their travel limit, so we have proposed sending representatives from the secretariat to Delhi to incorporate WHO's perspective. This implementation meeting will be attended by people that are working in countries, persons affected, and national leprosy program managers— people who are implementors, working on the programmatic side.
 - Bill: When are you going to meet in Delhi?
 - Courtenay: Can we combine this trip with a trip to meet the regional director?
 - Bill: I will be in Delhi from the 5th to the 14th working with the national review.
 - Taka: I will be there on the 20th.
 - Mark: I will be there the 7th to the 12th. I think we should try to organize another time with Taka. I could probably go in January.

- Bill: Let's arrange a call with Mark, Taka, and Courtenay to talk about this further.
- Geoff: Do you see this implementation meeting as a place to come up with a more detailed version of the GPZL implementation plan?
- Courtenay: Yes.
- MacArthur 100 Million & Change: We've moved forward to peer review. Courtenay reviewed interested proposals but none were as detailed as ours. We should hear next week if we've moved on.
- End Fund: We've had conversations about what's interesting to their donors, where we should be focusing, what types of initiatives we should be presenting to their donor base.
- BMGF: We're meeting (via teleconference) with Jordan Tapparo, dermatologist working in diagnostics. The foundation hasn't worked in leprosy and we'd like to try to work with them in a new way.
- NLR/TLMI joint effort: They're working on a joint proposal based on our MacArthur proposal. They're submitting this week.
- Canadian Grand Challenges: We have a proposal that went in for Canadian Grand Challenges from effect:hope, LEPR, and GPZL. Our role would be in convening discussions around the work of the proposal.
- Stop TB: We're trying to link with them to learn more about their partnership.

VI. **Operational Excellence Update: Christine Fenenga, Bart Vander Plaetse**

- ILC and NNN: These meetings allowed us to showcase the work of the Operational Excellence Working Group.
- Update Morocco country review: The review will take place from 14-21 October and preparations are in full swing. The Terms of Reference were included with the documents for this call. WHO/GLP has provided contacts of the Regional WHO NTD officer and they all provided input on the Terms of Reference. A WHO consultant has been selected to join the team in addition to a Moroccan consultant put forward by the MoH. Zaahira Gani (Novartis), Bart Vander Plaetse, and Christine will join from GPZL. The team will be supported by the national program staff under leadership of Dr. Ibtissam Khoudri. Dr. Ibtissam and Christine worked on compiling relevant background documents and data from the last 10 years, data collection tools, and reporting guidelines, and shared them with all reviewers 2 weeks before the start of the mission so they all can prepare and provide comments before the 14th. The mission will be shorter and more focused, supporting Morocco in defining an effective strategy for the last mile. With just 21 new cases in 2018 (19 MB), Morocco is one of the countries that can reach the zero leprosy target quite soon.

- Nepal follow up: This is ongoing. We have not yet received the final report from the team leader, who unfortunately had been ill, which has caused a delay. It is expected soon. Meanwhile, the Stakeholder Review report and Roadmap have been shared with stakeholders and a follow up meeting took place in Manila. Based on the meeting's results, Dr. Rabindra, Courtenay and Christine developed a declaration which was also included in the preparatory documents for this call. These documents will be sent to all partners that attended the meeting and have committed support. The next step will be for Dr. Rabindra to organize a meeting in Nepal with local partners to develop plans/proposals based on the roadmap and review reports, guided by the identified priorities for the first years. Plans are made to visit Nepal again to discuss a MoU with the MoHP. Funding opportunities are currently being explored.
- Restructuring Operational Excellence working Group: This was discussed during an extra ordinary steering team meeting in Manila. At the ILC in Manila, as well as the NNN conference in Liverpool, the working group has been able to present much of its work and receive positive feedback. The steering team meeting brought up interesting points for our next phase, such as evaluating the Best Practices and toolkit, building a strong pool of technical support, as well as continuing regular exchange between the research and operational excellence working groups. Our general objective and country model in combination with the proposed roles and responsibilities will be base for a new structure that will be further discussed in our next steering team meeting. In the next TL I will brief everyone on the outcomes of that conversation.
- Requests from other countries: These requests are expected. We need clear, transparent criteria to respond to these requests and will work this out in the coming weeks.

VII. Updates and observations from Leadership Team members

- Bill: I appreciated Erwin taking the time to send comments on the documents sent out. On more than one occasion as we've tried to navigate the relationships with WHO, I wonder how WHO might relate to other organizations in other settings – for example, they cannot put their name to our joint toolkit. How could we position our relationship with them in the most positive way?
 - Courtenay: In order for WHO's name or logo to be placed on anything it has to go through their legal review, this is standard operating procedure.
 - Taka: I think we need to have a discussion with members of WHO to discuss these issues.
 - Bill: We need a briefing document on how we talk about them, what's required, where we can use their logo, what the talking points are, etc.

VIII. Closing thoughts

- Taka: The foundation is organizing conferences in Brazil and Bangladesh between December 11th and 14th, and March 17th and 18th. For both countries we're working with their presidential offices. I hope the partnership can help us come up with the program for these conferences.
- Geoff:
 - I asked the ILEP technical commission and advisory panel to come back to me after the congress with their most important conclusions from the congress and from the global form in terms of what ILEP should do. Once I have that I'll share it with GPZL as well.
 - There was an interesting meeting with Dr Rekha Shukla, one of the joint secretaries of ministry of health and welfare in India at ILC. This is someone well worth talking to when you and Mark are in India. She's a driving force behind what's going to happen with leprosy in India.
 - I'm going to be speaking with one of Mark's colleagues about MDT supply sometime this month.