



Addressing Storage Management One Facility at a Time



Kafue District Medical Officer Dr. Kaunda Lembalemba, MOH Permanent Secretary Dr. Peter Mwaba and U.S. Ambassador Storella at SCMS prefabricated storage unit handover

The Ministry of Health (MOH) is now overseeing three storage facilities which were installed with the aim of addressing storage constraints in three districts. In April, the U.S. Government officially handed over two SCMS-procured prefabricated storage units for Kafue and Gwembe District Health Offices. Previously, both districts were forced to store commodities wherever available space could be identified. With the two units, both districts are now able to ensure improved commodity management because commodities are now housed in central locations. During the Kafue launch, Permanent Secretary Dr. Peter Mwaba commented, "It is my single honor and pleasure to welcome this facility as a gift from the United States Government to the Zambian people [and I] urge all of you colleagues to be good ambassadors in as far as service delivery is concerned." In May, the Elizabeth Glaser Pediatric AIDS Foundation handed over the Lusaka District warehouse located in Kalingalinga. Lusaka District faces unique storage challenges in trying to house the large volume of commodities required to meet the high patient demand. U.S. Ambassador Storella applauded the Government of Zambia and Ministry of Health for taking ownership and stated, "The more that you do, the more we will be able to do."



Deputy Minister of Health Dr. Patrick Chikusa and U.S. Ambassador Storella participating in the Lusaka District warehouse handover

Make (+) More Positive Campaign Visits Zambia

In May, Alere, the manufacturer of Determine HIV screening test kits, visited Zambia as part of its Make (+) More Positive Campaign. Through this campaign Alere promotes regular HIV testing, prevention methods to help reduce transmission of the virus, and advocates for ending the stigma and discrimination toward those living with HIV/AIDS. Alere is the largest supplier of HIV test kits globally and the main message of the campaign is to let people know they can be HIV-positive and live a happy, healthy, productive life. With support from



Debra Messing tours MSL to learn about logistics

Population Services International (PSI) spokeswoman and actress, Debra Messing, toured Voluntary Counseling and Testing clinics in Lusaka and attended the opening ceremony for the New Start Center in Mongu and the launch of Society for Family Health (SFH) services in Western Province. Along with Alere staff, the actress also visited Medical Stores Limited (MSL) to learn about the logistics challenges associated with the provision of HIV tests for health facilities throughout the country. As part of the campaign, for every person that "likes" the Facebook page (<http://www.facebook.com/morepositive>) Alere will donate one Determine HIV test to PSI for use in areas of the highest burden. MSL is scheduled to receive a donation of 150,000 tests from Alere through SFH, who is the principal recipient of the kits.

World Malaria Day Visit by USAID Mission Director

On April 25, the USAID/Zambia Mission Director, Dr. Susan Brems, and staff were accompanied by Kasama District Medical Officer Dr. Knoziack Chisenga, Northern Province Principal Pharmacist, Cornelius Nkaka and USAID | DELIVER PROJECT staff Howard Kapwenge and Michael Krautmann (Peace Corps Volunteer) to visit the

Kateshi Rural Health Center in Kasama District. The visit coincided with World Malaria Day and followed up on the performance and impact of the DELIVER project on the prevention and treatment of malaria. Joseph Nkole, Nurse in Charge, reported on the availability of essential medicines and malaria RDTs at the facility. Dr. Brems congratulated the center on its efforts to treat all malaria patients in the last year. The mission director also emphasized the critical role of RDTs in the successful diagnosis and treatment of malaria and recognized the impact of the project and facility staff in keeping the commodities stocked at rural health facilities.



Conducting an informal stock assessment Left to right: Northern Province Principal Pharmacist Cornelius Nkaka, Mission Director Dr. Brems, Nurse in charge Joseph Nkole and DMO Dr. Knoziack Chisenga

The Roll Out of EMLIP

Currently, there are 21 districts trained in the Essential Medicines Logistics Improvement Programme (EMLIP). By the end of 2012, six additional districts selected from the EMLIP pilot study control group will be trained, totaling 27 EMLIP districts. At present, nine out of the 10 provinces have districts trained in EMLIP and the roll out has been progressing at a rate of one district per month. Going forward the selection process for the roll out will consider an approach that trains an equitable number of districts among provinces.

JSI Awarded Special Recognition Certificate

During The Pharmaceutical Society of Zambia Annual General Meeting in June, JSI was awarded a special recognition certificate, presented by the City District Commissioner for its outstanding contribution to a decade of antiretroviral treatment in Zambia. The society acknowledged JSI's contributions through USAID | DELIVER PROJECT in increasing the availability of ARVs at service delivery points and training health staff in commodity management, which have reduced stock out rates. Also, through SCMS, the U.S. Government has procured and delivered \$153 million in ARVs as of September 2012.

Logistics Terms

DAR-Daily Activity Register
PMTCT-Prevention of Mother-to-Child Transmission
PDRIV-PMTCT Drug Report and Issue Voucher
REMMS-Report for Essential Medicines and Medical Supplies
R&R-Report & Requisition
SCC-Stock Control Card
UR-Usage Report

Improving Cold Chain Storage for Vaccines

In April 2011, The Bill & Melinda Gates Foundation contracted John Snow, Inc. (JSI) to assist in a field study of Global Good's (GG) passive vaccine storage device (PVSD). The PVSD addresses challenges health facilities face in properly storing cold chain vaccines in remote settings where electricity and refrigeration capabilities are erratic. Some of the proposed PVSD design features include interchangeable vaccine and ice stacks, capability to store all vaccine sizes and types, five liters of vaccine storage space and minimal training is required for operational use. GG supported the field study to determine the feasibility of utilizing the PVSD in Zambia and to identify how it could positively impact the Expanded Program of Immunization. Another pre-test goal was gaining feedback from relevant health personnel on key design features. The Ministry of Community Development, Mother and Child Health, in collaboration with JSI, identified 40 staff responsible for vaccines and cold chain monitoring to participate in the study. Focus group discussions held with central and provincial level health staff provided GG with insight into how the PVSD would function within Zambia's logistics systems and health policy. Another focus group—consisting of personnel from district health offices, health centers and health posts—inspected the two PVSD prototypes and provided feedback on product design. Based on the feedback received, GG developed the most recent prototype, the J5. The input from study participants resulted in changes to the vaccine stack design and capacity and coolant pack design, defining a use case for transporting the device and the overall device size. Given the success of this collaboration, GG plans to return to Zambia for future field tests.



Participants examining the PVSD prototypes
 Photo Credit: Kurt Armbruster, Global Good

Increasing the Number of Qualified

Trainers in the HIV Test Logistics System

An effective logistics system requires the right commodities, at the right time and in the right place. However, a system also greatly relies on well-trained and knowledgeable staff to ensure it is effectively implemented. Recently, there has been attrition of the National HIV Test Logistics System trainers and, with a growing number of testing facilities the USAID | DELIVER PROJECT determined the pool of 18 MOH and partner trainers was insufficient to meet training demands. As a result, a Training of Trainers (ToT) was held to bolster the number of qualified trainers in this logistics system. One participant, Kalanda Hamakoko, Biomedical Technologist at Mukinge Mission Hospital in Kasempa, stated, "I am looking forward to making participants understand and appreciate the six rights, the supply chain and the importance of using the standard operating procedures manual because these have been cornerstones of me appreciating the system." Twenty participants were successfully trained—17 MOH staff and three staff from Catholic Relief Services, Zambian Defence Force and Churches Health Association of Zambia—bringing the total number of trainers to 38.

Contraceptive, Malaria and ARV Availability at MSL as of July 2012

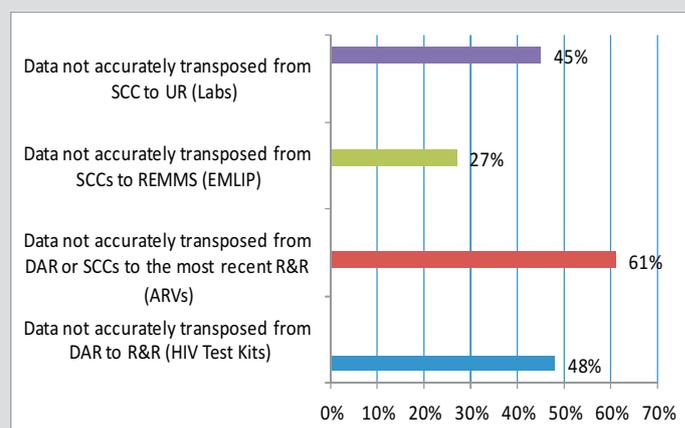
Contraceptives	Malaria	ARVs
All family planning products are in stock except: *Noristerat—A shipment is scheduled to arrive in November. *Note: There is low stock of Oralcon F. Microgynon will be delivered as a substitute and it will be listed under a new ordering code. The shipment is scheduled to arrive in September.	All malaria products are available, but there is low stock for the following: *Artemether-Lumefantrine (1*6 and 3*6), Malaria RDTs and Sulphadoxine/Pyrimethemine *Shipments for Artemether-Lumefantrine and Sulphadoxine are expected to arrive in September.	*All ARVs are in stock. *Zidovudine/Lamivudine 300mg/150mg Fixed Drug Combination Tablets—A stock out of AZT/3TC FDC is anticipated in October and will last up to three months. To ensure patients continue receiving their medication, single preparations of AZT 300mg and 3TC 150mg will be supplied to facilities in the interim period. This is a temporal administrative measure and not a change in regimen. Facilities are expected to counsel clients accordingly. For clarifications, please contact Dr. Mwango, National ART Coordinator or Mr. Chikuta Mbewe, Deputy Director, Pharmaceutical Services at MOH at Ndeke House. MOH: 0211 253040 ext. 1056/1020.

Lessons from the Field: *Avoid Transposing Errors*

Monitoring logistics systems can be challenging and time consuming, but correctly adding the totals on SCCs and DARs will ensure your facility receives the correct amount of commodities your patients depend upon. If totals are incorrect on SCCs and DARs, the inaccurate information is copied on to the R&Rs, REMMS and UR. Out of the four logistics systems assessed during M&E visits in January-May, inaccurate transposition of data was the number one challenge for HIV Test Kits and Labs and the second for EMLIP and ARVs.

Helpful steps to accurately transpose data:

1. Review the SOP manual and follow the respective job aids.
2. Use a calculator to tabulate your totals.
3. Seek on-the-job training from staff who have received training in the particular logistics system.
4. Follow up with your DHO for guidance.
5. Ask for assistance from USAID | DELIVER PROJECT and MOH personnel when M&E teams visit your office.



League Standings as of April 2012: *Don't get relegated, get promoted!*

Premier League		
Logistics System	District or Province	Reporting Rates
ARVs	Southern	100
EMLIP	Chavuma, Choma, Kaoma, Milenge, Mungwi, Mwense, Nakonde and Shangombo	
HIV Test Kits	Chingola, Chadiza, Chavuma, Chilubi, Kalulushi, Luangwa, Mambwe, Milenge, Mpongwe, Mporokoso, Nakonde and Shangombo	
Labs	N/A	
PMTCT	Central, Luapula, Lusaka, North Western, Southern and Western	

Division 1		
Logistics System	District or Province	Reporting Rates
ARVs	Central and Luapula	95-99
EMLIP	Chama, Kasama and Mwinilunga	
HIV Test Kits	Chipata, Kalabo, Kapiri-Moshi and Kazungula	
Labs	N/A	
PMTCT	N/A	

Division 1A		
Logistics System	District or Province	Reporting Rates
ARVs	Copperbelt, Eastern, Lusaka and Northern	90-94
EMLIP	Kabompo, Kafue and Mufumbwe	
HIV Test Kits	Chama, Chibombo, Chiengi, Chililabombwe, Chinsali, Lufwanyama, Lundazi, Mansa, Mkushi, Monze, Nchelenge and Senanga	
Labs	Copperbelt, Northern and Western	
PMTCT	N/A	

Division 2		
Logistics System	District or Province	Reporting Rates
ARVs	Western	85-89
EMLIP	Mkushi and Mongu	
HIV Test Kits	Kabompo, Kasama, Katete, Mazabuka, Mongu, Mufulira, Mumbwa, Mungwi Namwala, Petauke and Serenje	
Labs	Eastern, Lusaka and Southern	
PMTCT	N/A	

Division 2A		
Logistics System	District or Province	Reporting Rates
ARVs	North Western	80-84
EMLIP	N/A	
HIV Test Kits	Choma, Chongwe, Kafue, Livingstone, Luanshya, Mwense and Ndola	
Labs	Luapula	
PMTCT	Copperbelt	

Spotlight Stories: Districts Making a Difference

Innovative Solutions for Improving PDRIV Reporting Rates

Central Province

Out of the 26 PMTCT-only facilities in Chibombo District, all of which are remote, the average monthly PDRIV reporting rate to the district health office stands at 84% with some months reaching 100%. All facilities reported at least once in the third and fourth quarters of 2011 and in the first quarter of 2012. District Medical Officer Dr. Priscilla Chisha has been encouraging PDRIV reporting by implementing the slogan and practice, "No Report, No Imprest!" meaning that if a clinic does not submit its report, it does not receive funding for regular operations. This tactic was first employed in April 2011 and is adapted from, "No Product, No Program." District Pharmacist Isaac Zyambo oriented DHO managers to use this incentive program, through on-the-job training on which reports are required to be submitted for each logistics system prior to distribution of imprest funds to health facilities.



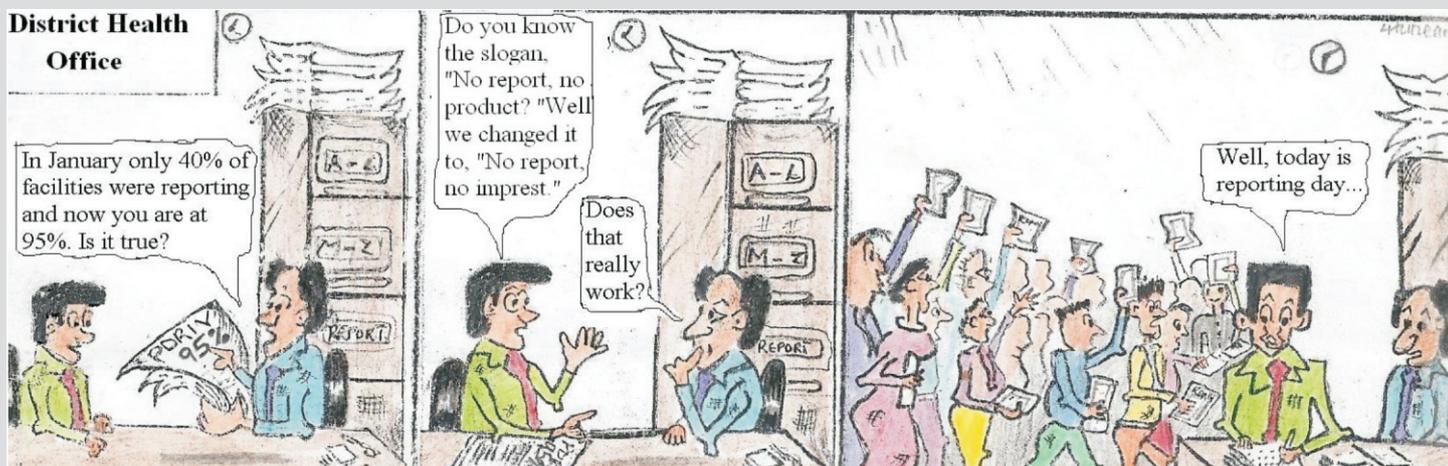
District Pharmacist Isaac Zyambo and DMO Dr. Priscilla Chisha tracking PDRIV reports

Southern Province

In Kazungula District, the DHO has been utilizing the zonal placement of vehicles to reduce the transportation challenges health facilities face in trying to submit their PDRIVs. The district has divided the facilities into four zones, three of which have been given a vehicle (out of the five on hand). The vehicles are stationed at a centrally located health center and the fourth zone is covered by the DMO vehicle based at the office. On a pre-arranged date, PDRIVs and other reports are submitted to the designated locations for delivery to the district. In turn, the respective zonal vehicle collects and delivers the commodities for each site that has reported. This initiative covers all commodity areas within the district. Zonal vehicle placement is also being utilized in Choma District. In the last reporting quarter, because of this support initiative, Kazungula (13 out of 13) and Choma (35 out of 35) Districts had 100% PDRIV reporting rates to the DHO level.



District Pharmacy Technologist Coster Hamweendo reviewing a PDRIV report



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Upcoming Events

DATE	ACTIVITY	LOCATION
Sept. 10	Child Health Week	Nationwide
Sept. 17	PMTCT LS Training	Kabwe
Sept. 24	PMTCT LS Training	Kasama
Sept. 24	EMLIP LS Roll Out Training	Choma
Sept. 27	P&D Meeting	Kitwe
Sept. 27	P&D Meeting	Kabwe
Sept. 27	P&D Meeting	Lusaka



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