



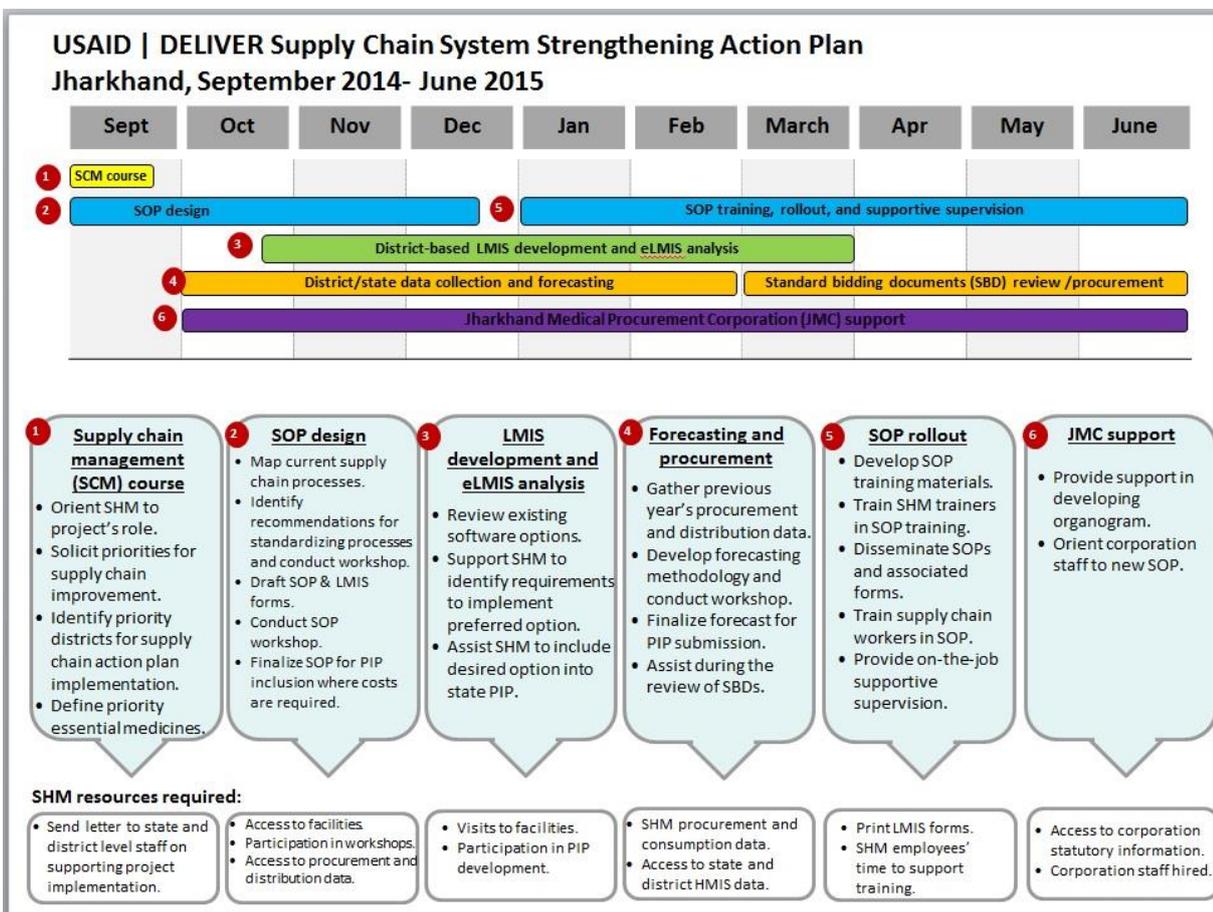
Overview: RMNCH+A Strategy (Jharkhand)

As part of ongoing support to implement the Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCH+A) strategy, USAID works with the Ministry of Health and Family Welfare (MOHFW), Government of India to strengthen the supply chain management of essential RMNCH+A commodities. USAID engaged the USAID | DELIVER PROJECT (the project), implemented by John Snow India Private Limited (JSIPL), to provide technical support to the MOHFW and state health missions (SHMs) on the supply chain management of RMNCH+A commodities, including selected HIV- and AIDS-prevention and treatment commodities (condoms and sexually transmitted infection and opportunistic infection drugs). The project provides assistance at the national level and to SHMs in four states—Haryana, Himachal Pradesh, Jharkhand, and Uttarakhand—where USAID is the lead development partner under the Call to Action for Child Survival and Development.

Continuous provision of all the RMNCH+A priority commodities is a critical element of success for health system strengthening efforts. Implementation of the RMNCH+A strategy included coordinated interventions to improve health systems; monitoring and performance evaluation; and converging services, supplies, and infrastructure at the point of care.

In Jharkhand, the project started by conducting a landscape survey (qualitative) and stock status survey (quantitative) with the following objectives:

- Provide an overview of and insight into the organizational structure and operational capabilities of the supply chains.
- Gather and analyze quantitative data to identify key gaps, challenges, and opportunities to improve supply chain operations managed by the MOHFW and the SHM.



Based on these findings, the project worked with SHM counterparts to develop a short-term action plan (see figure above) for the following key activities:

Activity 1: Develop and conduct a supply chain workshop for health professionals who have supply chain responsibilities.

The project developed and conducted a supply chain workshop in September 2014 that focused on inventory management, logistics management information systems (LMIS), and warehousing. Participants from the state and selected high-priority districts were introduced to supply chain management principles, as well as international best practices.

Activities 2 and 5: Strengthen supply chain management operations by institutionalizing standard operating procedures (SOPs) for inventory management and capacity building of health professionals who have supply chain responsibilities.

A detailed, facility-based data collection effort was conducted in six districts in September 2014 to identify the current supply chain processes and LMIS forms being used. Through a comparative review with internationally accepted best practices, detailed SOPs were documented for the inventory management system and LMIS, including review and/or design of facility forms for data collection and reporting. The first draft of the developed SOPs was presented to the SHM for review and suggestions at a workshop on October 2014 in Ranchi. The second draft of SOPs were presented to and reviewed by health officials, vetted by the SHM, and approved by the Principal Secretary and Mission Director in May 2015.

The SOPs were rolled out to all health facilities in two pilot districts, Gumla and Lohardaga, in June and July 2015. Two-day trainings were conducted for district-level program and medical officers and store pharmacists. One-day trainings at the facility level were conducted for auxiliary nurse midwives, lady health visitors, staff nurses, and other dispensing staff. More than 480 health professionals have received SOP trainings in these two districts.

Activity 3: Facilitate the process for defining requirements for the electronic logistics management information system (eLMIS) to support improvements in timeliness and visibility of supply chain data for decisionmaking at the state level.

To streamline supply chain management and improve data visibility, the project facilitated the process for the selection of an appropriate eLMIS system in Jharkhand, working closely with SHM and other stakeholders to conduct a review of eLMIS options in India. After several rounds of discussions, the SHM selected the Drug and Vaccine Distribution Management System from the Centre for Development of Advanced Computing (C-DAC). After signing a memorandum of understanding (MOU) in the second half of 2015, implementation began. The project and SHM worked closely to define the base MOU with C-DAC and to include the necessary budget request into the 2015-2016 PIP. The project will continue to support the implementation of an eLMIS solution after the MOU signing with C-DAC.

Activity 4: Improve the forecasting procedures for essential medicines included in the 5×5 RMNCH+A matrix and conduct forecasting exercises at the state and district levels for procurement and supply planning.

The landscape analysis revealed a need to strengthen the forecasting and quantification processes to proceed with centralized state procurement. Initially, joint project and district experts collected existing health management information system (HMIS), service indicator, and logistics data. Forecasting assumptions and guidelines were validated during a two-day hands-on workshop in December 2014 for Gumla and Lohardaga Districts. The final forecast for the 5×5 RMNCH+A essential medicines was prepared for these two districts and shared with the SHM for procurement in January 2015. At the request of the SHM, the project extended the forecasting methodology of RMNCH+A commodities to all districts across the state to ensure the availability of quantities of most-essential medicines for the

procurement. The project is working with SHM on the forecasting methodology for short-listed 90+ essential medicines.

Activity 6: Support the operationalization of Jharkhand Medical Corporation.

The project facilitated a site visit to Rajasthan and Haryana Medical Service Corporations in April 2015 to familiarize the SHM with successful Indian medical corporations. The project also helped the SHM review and update a draft organogram for the Jharkhand Medical Corporation (JMC), and made recommendations and provided specific terms of reference for hiring three general managers in March 2015. The project is helping the JMC review standard bidding documents and a procurement policy, and is helping it prepare short- and medium-term action plans.

The authors' views expressed in this publication do not necessarily reflect the views of the U.S. Agency for International Development or the United States Government.

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