



USAID | **DELIVER PROJECT**
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TASK ORDER MALARIA

FY 2008 SEMI-ANNUAL REPORT

OCTOBER 2007 – MARCH 2008



PRESIDENT'S MALARIA INITIATIVE



MAY 2008

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Abstract

This report documents the activities of Task Order 3 (Malaria) during the first six months of the 2008 fiscal year, covering the period October 1, 2007 – March 31, 2008. Key sections include major activities under each objective, accomplishments, implementation issues and proposed solutions and planned performance objectives for the next six months.

Cover photo: Photo of Liberian children receiving a long-lasting insecticide treated bed net during a PMI distribution campaign in February of 2008. Photo by Polina Flahive.

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ACRONYMS

ACT	artemisinin-based combination therapy
ADDO	Accredited Drug Dispensing Outlet
AL	artemether lumefantrine
AMFm	Affordable Medicines Facility for malaria
APE	community health worker in Mozambique
AS/AQ	artesunate amodiaquine
CA	collaborating agencies
CDC	Centers for Disease Control
CHAI	Clinton HIV/AIDS Initiative
CMAM	Central de Medicamentos e Artigos Médicos
CMS	Central Medical Stores
CTO	Cognizant Technical Officer
EDI	electronic data interchange
EOI	expressions of interest
FGV	Flex Global View (UPS)
FHI	Family Health International
FIND	Foundation for Innovative New Diagnostics
FO	field office
FY	fiscal year
GMP	good manufacturing practice
IEC/BCC	information, education, and communication/behavior change communication
IPCA	Indian Pharmaceutical Congress Association
ILS	Integrated Logistics System
IQC	Indefinite Quantity Contract
JSI	John Snow, Inc.
LLIN	long-lasting insecticide treated nets
MIS	management information system
MOH	Ministry of Health
MOH&SW	Ministry of Health and Social Welfare

MOPs	Malaria Operational Plans
MSD	Medical Stores Department
MSH	Management Sciences for Health
NDA	National Drug Authority
NDS	National Drugs Service
NIR	near infrared
NMCP	National Malaria Control Program
OAA	Office of Acquisition and Assistance
PMI	President's Malaria Initiative
PNCM	Programa Nacional de Controlo da Malária
PO	purchase order
PSM-WG	Procurement and Supply Chain Management Working Group
PSU	Pharmaceutical Supplies Unit
QA	quality assurance
RBM	Roll Back Malaria
RDTs	rapid diagnostic tests
RFQ	Request for Quotes
RPM Plus	Rational Pharmaceutical Management Plus project
SDP	service delivery point
SKU	stockkeeping unit
SOP	standard operating procedure
SPS	Strengthening Pharmaceutical Systems project
STTA	short-term technical assistance
TA	technical assistance
TO	task order
TOT	training of trainers
UPS	United Parcel Service
USG	United States Government
USP	United States Pharmacopeia
WHO	World Health Organization
WHO-WPRO	World Health Organization Regional Office for the Western Pacific
WHOPES	WHO Pesticide Evaluation Scheme

EXECUTIVE SUMMARY

This semi-annual report covers the period from October 1, 2007 to March 31, 2008, and describes the activities of the Malaria Task Order under the USAID | DELIVER PROJECT Indefinite Quantity Contract (IQC). The U.S. Agency for International Development (USAID) signed the five-year task order contract on April 6, 2007. The activities accomplished during the reporting time period are a reflection of the maturation of the Malaria Task Order as it has worked to support the President's Malaria Initiative (PMI) through its three principal objectives:

1. Objective 1: Improve and expand USAID's provision of malaria commodities to programs.
2. Objective 2: Strengthen in-country supply systems and capacity for management of malaria commodities.
3. Objective 3: Improve global supply and availability of malaria commodities.

The Malaria Task Order (also referred to as TO3) is implemented by John Snow, Inc. (JSI), in collaboration with PATH, Crown Agents Consultancy, Inc., Abt Associates, Fuel Logistics Group (Pty) Ltd., UPS Supply Chain Solutions, Family Health International, The Manoff Group, 3i Infotech, Center for International Health and Development (Boston University School of Public Health), and U.S. Pharmacopeia (USP).

A continued priority for this six-month period was to ensure that essential malaria commodities could be procured on demand and delivered quickly to the countries with PMI programs, hence the continued emphasis on Objective 1. The commodities include pharmaceutical drugs, such as artemisinin-based combination therapy (ACTs), rapid diagnostic tests (RDTs), and long-lasting insecticide treated nets (LLINs), as well as laboratory equipment and supplies.

Major accomplishments during this six-month period include—

- Procured commodities worth \$18,984,294 for Angola, Benin, Liberia, Malawi, Mali, Mozambique, Nigeria, Rwanda, Senegal, Tanzania, Uganda and Zambia.
- Delivered 6,340,240 treatments of malaria pharmaceuticals to five countries; 460,115 LLINs to two countries; and 1,129,000 RDTs to two countries.
- In Liberia, contributed technical assistance for door-to-door distribution of LLINs during the country's PMI launch, covering nearly 100% of the targeted population.
- In Angola, successfully coordinated the emergency distribution of artemisinin-based combination therapy (ACT) to avoid pending stockouts.
- Participated in several international malaria meetings designed to address and improve the global supply of malaria commodities.

This document is divided into four chapters: Description of Activities, Accomplishments, Implementation Issues and Suggested Solutions and Planned Performance Objectives for the Next Six Months. The appendices provide additional detail regarding the Malaria Task Order structure, procurement ordering procedures and short- and long-term technical assistance performed during the reporting period.

DESCRIPTION OF ACTIVITIES

OBJECTIVE 1: PROVISION OF MALARIA COMMODITIES

A. PROCUREMENT

A principal activity of the Malaria Task Order is to support the President's Malaria Initiative by procuring malaria commodities in response to requests placed by USAID Missions, which are based on the needs outlined in the yearly Malaria Operational Plans (MOPs). In the first six months of FY08, requests for procurement assistance were processed from Angola, Benin, Mali, Malawi, Mozambique, Liberia, Nigeria, Rwanda, Senegal, Tanzania, Uganda and Zambia.

These requests went through the following process:

- confirming Mission procurement and delivery needs
- sending Request for Quotation (RFQ) to pre-approved vendors for RDTs and LLINs
- obtaining Office of Acquisition and Assistance (OAA) approvals where required and concurrence from Cognizant Technical Officer (CTO)
- confirming purchase orders (POs) with vendors
- expediting deliveries to countries
- closing procurement transactions

Order Confirmation. The project had already developed three order forms – RDTs, LLINs, and ACTs – which were sent to Missions. Missions were asked to complete and sign these forms, which serve as the formal requests for procurement assistance. The forms confirm details of commodity specifications, quantities, packaging, consignee names and contact information and authorization from the Mission to procure.

During the period of this report the three forms were further refined to include fields for the Missions to request inputs for short-term in-country logistics or distribution requirements. This change was in addition to earlier refinements which included sign-off fields for the Mission and the National Malaria Control Program (NMCP). See Appendix C for copies of the three order forms.

Request for Quotation for RDTs and LLINs. After the Mission signed the order forms, the procurement unit sent a request for quotation (RFQ) to pre-approved vendors. Vendors were given seven days to respond. Missions made the final decisions on the procurement awards after considering price, ability to deliver according to specifications and lead time.

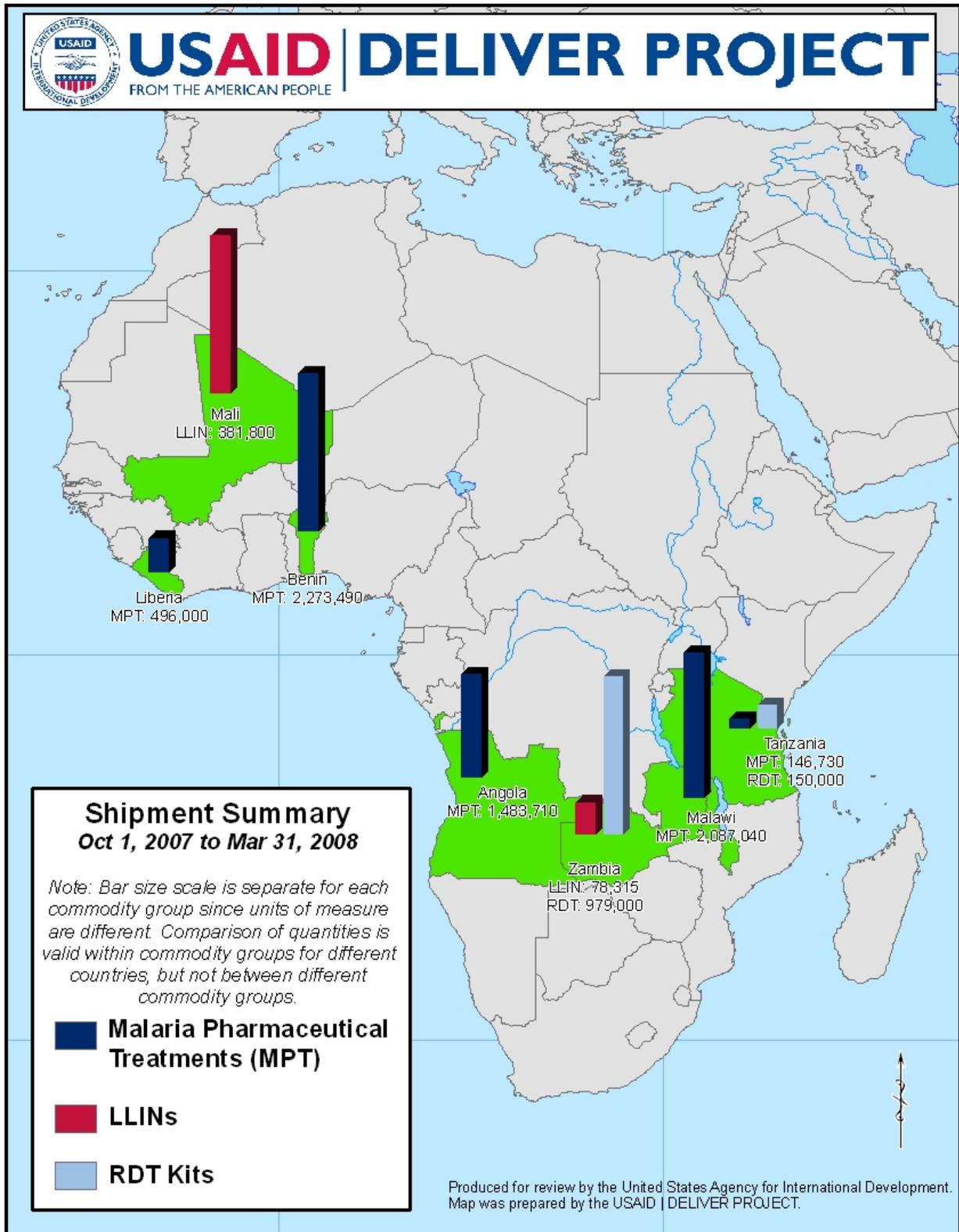
Four RFQs were issued during this reporting period, resulting in four awards of Purchase Orders (POs). Eleven other POs were placed with approved vendors which did not require the full RFQ process (e.g. Coartem.)

The procurement team prepared 11 submissions for OAA approvals. The time that it took to receive approval varied widely, ranging from one day (in the case of Senegal), to almost four weeks (Zambia).

Table 1. Commodities Ordered Between October 1, 2007 and March 31, 2008

COUNTRY	DATE	COMMODITY	VALUE (US\$)	QUANTITY	VENDOR
Liberia	October 2007	AS/AQ	\$283,035	496,000	Missionpharma A/S
Rwanda	October 2007	LLINs	\$2,403,500	550,000	Bestnet/Intection
Uganda	October 2007	LLINs	\$1,505,000	350,000	Sumitomo Chemical
Angola	November 2007	Lab Kits	\$95,000	25	Missionpharma A/S
Nigeria	November 2007	LLINs	\$447,360	96,000	Vestergaard Frandsen
Malawi	December 2007	Coartem	\$2,163,240	2,311,200	Novartis Pharma AG
Angola	December 2007	Coartem	\$1,635,795	1,483,710	Novartis Pharma AG
Angola	December 2007	RDTs	\$232,500	375,000	Orchid Biomedical
Zambia	December 2007	RDTs	\$550,041	979,000	ICT/R&R
Benin	December 2007	SP tablets	\$69,000	2,300,000	UNICEF SD
Senegal	January 2008	LLINs	\$3,708,655	790,000	Vestergaard Frandsen
Tanzania	January 2008	RDTs	\$217,000	350,000	Orchid Biomedical
Zambia	January 2008	LLINs	\$379,800	78,315	Vestergaard Frandsen
Mali	February 2008	LLINs	\$1,127,552	212,000	Vestergaard Frandsen
Mozambique	February 2008	Coartem	\$1,597,958	1,440,000	Novartis Pharma AG
Benin	February 2008	Coartem	\$577,872	1,073,490	Novartis Pharma AG
Tanzania	February 2008	Coartem	\$146,940	146,730	Novartis Pharma AG
Malawi	March 2008	Coartem	\$644,889	668,160	Novartis Pharma AG
Angola	March 2008	Coartem	\$1,198,137	1,152,000	Novartis Pharma AG
Angola	March 2008	RDTs	\$232,500	375,000	Orchid Biomedical

Figure 1. Map of Commodities Delivered Between October 1, 2007 and March 31, 2008



Expediting Deliveries to Countries. Freight forwarding was done either by suppliers or by UPS, the TO3 partner responsible for freight forwarding. The choice depended primarily on cost and ability to consolidate shipments.

B. FREIGHT FORWARDING

The freight team successfully assisted with shipments to six of the fifteen PMI countries from October 2007 through March 2008. Shipment execution tasks include freight estimate preparation, vendor door pickup, freight booking, shipment tracking, customs clearance and final recipient delivery. The relatively large shipment size of most orders and limited airline capacity have presented challenges but the freight team has been able to respond effectively. The freight team was responsible for the shipments summarized in the following table:

Table 2. Freight Forwarding Shipments

Country	Product	Shipment value (USD)	Weight (KGs)
Angola	ACTs	\$ 1,635,795	29,185
Benin	ACTs	\$ 577,872	16,258
Liberia	AS/AQ	\$ 240,580	3,746
Malawi	ACTs	\$ 2,163,240	39,534
Tanzania	ACTs	\$ 146,940	2,899
Zambia	LLINs	\$ 341,453	47,381

Angola, Benin, Liberia, Malawi, and Tanzania shipping instructions have been completed and vetted with the UPS country agent. Shipping instructions document the consignee contact, UPS destination contact, customs documentation requirements, and special country customs processes that must be followed. The freight team is finalizing the remaining PMI country shipping instructions, which are expected to be available in April 2008.

Shipment visibility was enhanced during the reporting period due to the fact that key shipment milestones are now being updated in Orion, part of the USAID | DELIVER PROJECT's Management Information System (MIS). The freight team continued to provide expert advice to the MIS group in order to finalize the UPS electronic data interchange (EDI) feed. The EDI feed will provide consistent and automatic milestone updates from the UPS Flex Global View (FGV) tracking system to Orion, and is expected to be implemented in the second quarter of 2008.

The freight team has identified local agents in each PMI country to facilitate the clearance and delivery process. The agents will work with the consignee to expedite shipments through customs and arrange final delivery. Currently, UPS has agents in all 15 PMI countries and as the examples below show, they have already been quite helpful:

The UPS Malawi agent provided short term storage for the second ACT consignment. The ACTs were warehoused for a few weeks and outbound shipments were coordinated with a third party distribution company. In-country warehousing services are expected to be utilized for future shipments.

In Angola, the freight team successfully coordinated emergency in-country ACT distributions. The UPS Angola agent worked directly with the central medical stores (Angomedica) using air and road freight to distribute ACTs areas that were experiencing stockouts.

C. QUALITY ASSURANCE

In the first six months of FY08, the Malaria Task Order implemented the quality assurance (QA) steps outlined in the standard operating procedures (SOPs) for quality monitoring activities. The QA team has used these initial procurements as a means of identifying successes and areas for potential improvement, and the SOPs have proven to be successful for procuring monitoring quality during the supply chain. During this time the TO3 QA partners provided feedback to the manufacturers in order to maintain open dialogue and ensure that minor issues are not exacerbated. Members of the team have also taken advantage of opportunities to collaborate on quality issues with WHO-WPRO, FIND, and the Clinton Foundation for RDTs, UNICEF for LLINs and CDC-Atlanta for pharmaceutical drug products.

Long Lasting Insecticide Treated Nets (LLINs). To date, the Quality Assurance team has arranged for physical and chemical testing to be conducted concurrently with shipping on several orders of polyester deltamethrin LLINs procured from Vestergaard-Fransden, and polyethylene permethrin nets from Sumitomo A-Z, both of which are WHOPE II suppliers. All shipments have met specifications and were delivered on time.

The procedure for pre-shipment testing was shared with the Uganda National Drug Authority (NDA) and with UNICEF, who provided positive feedback about the project's approach to LLIN testing and details regarding this procedure. UNICEF has since voiced interest in collaborating with the USAID | DELIVER PROJECT and PMI on supplier visits.

As part of its efforts to provide effective quality assurance for LLINs, the QA team expects to conduct audits of the Vestergaard-Fransden facility in the coming months. To date there have been no product quality complaints from any of the countries that have received commodities procured by the USAID | DELIVER PROJECT.

Rapid Diagnostic Test Kits (RDTs). TO3 conducted two procurements of RDTs (p-falciparum kits) during the reporting time period. The post-shipment testing was conducted by WHO-WPRO laboratories in the Philippines and Cambodia, and met the WHO requirements. There were a few difficulties associated with testing these kits, including a delay of the post-shipment samples from Zambia due to the courier that was used, and the large number of lots in this shipment.

Concerns that WHO-WPRO would not have the capacity to handle these samples were discussed in February, when representatives of the QA team participated in two WHO sponsored gatherings in Geneva. The first was the "WHO Informal Consultation on Quality Assurance of Malaria Microscopy," which focused on reviewing recent experiences of assessment schemes for malaria microscopy. The second gathering was a forum entitled the "WHO Informal Consultation of the WHO-FIND Malaria Diagnostics Evaluation Programme." This meeting focused on the progress, problems and recommendations for improvement of the malaria RDT lot testing procedures. It was evident from this meeting that the USAID | DELIVER PROJECT, PMI and the Clinton

Foundation are working to help spread the word that RDT quality is an important issue which needs attention.

Following the QA team's recommendations, the USAID | DELIVER PROJECT and PMI have agreed to help fund WHO-FIND's External Quality Assurance program for improving laboratory competence for RDT lot testing.

Pharmaceutical Drug Products

Coartem. There have been over 70 batches of Coartem shipped and distributed to Tanzania, Malawi, Angola, Benin and Mozambique. The QA manager and two members of the procurement unit of the USAID | DELIVER PROJECT visited the Novartis facility in Suffern, New York to provide customer feedback on packaging, labeling and other topics.

Artesunate Amodiaquine (AS/AQ). Identifying a supplier for the first procurement of AS/AQ for Liberia was challenging but with the assistance of the PMI team and USP, a solution was found. During the process, the project was able to update its information on AS/AQ suppliers and devised procedures for handling similar situations should they arise.

Sulfadoxine-pyrimethamine (SP). SP manufactured by IPCA-India was procured for Benin in February. The order went through UNICEF and was tested by USP-India. Because there was no information given on the number of lots to be tested prior to completion of the order, the time to complete to conduct pre-shipment testing was longer than anticipated.

As a result of the challenges encountered with obtaining and testing SP and AS/AQ, the QA team developed a manufacturer and wholesaler questionnaire which has since been used to conduct desk audits of manufacturer and product quality information. Furthermore, product testing concurrent to shipping for product obtained from the wholesalers has been considered as an approach to alleviate delays due to testing.

The AS/AQ and the SP procurements also spurred discussion of alternatives to the current pre-shipment testing requirements. This is currently under review with the USAID | DELIVER PROJECT and PMI, and it is anticipated that some procedures may require revision based on these discussions. An audit of the wholesalers (IDA Foundation, MissionPharma, and UNICEF) will be conducted in the next reporting period.

Quality Assurance Partners Meeting. The second QA partners' meeting was held in Arlington, VA in October. The purpose of the meeting was to review the quality procedures and consider possible revisions thereof, and also to have a meeting and discussion with PMI and Dr. David Bell of WHO-WPRO about quality lot testing for RDTs. The next QA Partners meeting is scheduled for April 22, 2008.

OBJECTIVE 2: STRENGTHENING IN-COUNTRY SUPPLY SYSTEMS

Strengthening in-country supply systems and building greater capacity for improved management of malaria commodities at the local level are key to the success of the Malaria Task Order. These actions ensure the rational and efficient use of commodities procured and delivered under Objective 1 activities. The following section will focus on specific activities performed in countries where the

USAID | DELIVER PROJECT has an office and provided longer-term assistance during the first FY2008 reporting period.

A. GHANA

- The Ghana Field Office (FO) successfully implemented ad-hoc Mission requests, including the transportation of bed nets and printing of vouchers on behalf of USAID in support of the maternal and child health campaign.
- The Malaria Commodities Supply and Pharmaceutical Care Management systems joint assessment report was finalized and submitted to the Mission for comments. The report identified problems and proposed interventions for all components of the pharmaceutical management and logistics cycle.
- A training course and TOT curricula for the Public Health Commodities Logistics System was developed and 30 master trainers trained.
- The field and home office teams reviewed the workplan and budget for the Malaria Task Order and submitted them to the Mission for approval.
- A Program Officer dedicated to malaria was hired and integrated into the Ghana FO team.

B. LIBERIA

- Based on the results of an LLIN logistics assessment performed by the project, a TO3 team developed recommendations for a number of activities: forecasting, procurement, inventory management, warehousing, transportation and distribution, IEC/BCC, social marketing and private sector, coordination mechanism, product selection and a more efficient LMIS. The team also prepared plans for the implementation of the PMI jump start activities.
- The project oversaw the delivery and distribution of 170,440 LLINs in Bomi and Grand Cape Mount Counties, reaching a near 100% coverage of households in the target counties.
- Distribution forms were developed and a TOT for 22 supervisors on the use of the forms was conducted. These supervisors have since trained 287 CHWs in two counties.
- A total of 496,000 doses of ACTs were procured and delivered to the NDS for distribution in Monrovia and other counties. The press release on the ACTs delivery and official hand over ceremony was disseminated and 11 newspapers, TV and radio stations covered the event.
- The PMI launch was attended by nearly 1,000 delegates, including representatives from six counties and six newspapers that published articles about the event.
- Principal candidates for the Resident Logistics Advisor and Finance and Administrative Officer have been identified and interviewed.
- Field office start-up began, including opening of the bank account and securing an office space at the NDS.
- The field and home office teams finalized the workplan and budget for the TO Malaria and submitted them to the Mission for approval.

C. MALAWI

- Given the projected level of work planned for FY2008, the project is adding a locally-hired Resident Logistics Advisor position to serve as the point person on day-to-day malaria-related work and to provide stakeholders with a dedicated resource for PMI activities.

- TO3 coordinated the procurement and delivery of over four million doses of Coartem which were shipped in October and December 2007. The project also requested a modification of the Coartem packaging to allow easy identification of the four different presentations, and Novartis responded by color-coding the shipping cartons.
- After the initial distribution, an assessment was carried out by members of the ACT Taskforce, which featured five members of the USAID | DELIVER PROJECT. The taskforce developed a monitoring tool that was used for spot checks in 62 randomly selected facilities.
- The project designed Excel-based malaria commodity tracking tools and corresponding job aids to enable local facilities and regional medical stores to base re-supply requests on need.
- The Malawi FO team has worked with the Mission to address the difficulties surrounding the termination of the GLOCOMS contract with the Central Medical Stores (CMS), and distribution of the second ACT consignment continued through CMS in March.

D. MOZAMBIQUE

- The USAID | DELIVER PROJECT is piloting a type of cool box in Maputo, Tete and Quelimane provinces to store malaria commodities that require storage temperatures at 25 degrees Celsius or cooler
- The first draft of a new training manual was produced by the project, and incorporated comments from the Director of the Malaria Program at the MOH. The project is working with the Malaria Program to organize a workshop with all stakeholders involved in Malaria activities to discuss the first draft and collect comments to finalize the training materials. The workshop is scheduled for April 3-4, 2008.
- The project had a joint meeting with CMAM, PNCM, WHO and USAID/PMI on February 22 to discuss the appropriate system for distribution of artemether lumefantrine (AL) to the levels receiving Kits A, B, C. The group decided to pilot the two options (“push” and “pull” systems) in selected districts from May-July to help inform a decision on the appropriate system for distribution of AL in 2009.
- The project participates in the working group on the development of a three year business plan for the malaria program in Mozambique, and has hosted two meetings with the sub-group “Logistics and Procurement of Malaria Commodities.” The project has been tasked to work with CMAM to quantify the malaria drugs needed for 2009 and 2010.

E. TANZANIA

- The shift from monotherapy to ACTs has required the project’s technical assistance in monitoring distribution of Coartem, discussing modalities of integrating Coartem into the Integrated Logistics System (ILS), and transitioning Coartem from a centrally-managed “push” system to a facility-level-driven “pull” system.
- The project has developed a short refresher course on filling out the AL Research & Related forms and proper use of the stores ledger to prepare service providers to start placing their own orders in April.
- The USAID | DELIVER PROJECT supported the NMCP in designing a monitoring and supervision tool that has now been used in 16 out of 21 regions, producing aggregated data from 180 facilities for each of the AL weight bands, as well as data for other anti-malaria treatments (SP, quinine). This tool is now being used to regularly monitor stock status.

- While SP availability continues to be a challenge, the project has provided assistance in managing practical solutions to reduce SP shortages in certain regions. This involved organizing and quantifying for a one-time push of SP treatments to districts in at-risk or stocked-out regions.
- To improve product availability in the private sector, the USAID | DELIVER PROJECT was involved in brokering a transfer of Coartem from the Accredited Drug Dispensing Outlet (ADDO) program to a pilot initiative managed by the Clinton Foundation to make Coartem available through chemist shops. As uptake through the ADDO program has been slower than expected, this transfer decreased the risk of expiries without jeopardizing availability for the ADDOs.
- The USAID | DELIVER PROJECT is also preparing for the first annual quantification of anti-malarials scheduled for mid-April. This quantification and procurement planning exercise will be conducted in collaboration with Tanzania's National Malaria Control Program. Databases for the ADDO and UNHCR will also be prepared

F. SHORT-TERM TECHNICAL ASSISTANCE

In the context of the Malaria Task Order, STTA generally consists of one- to three-week assignments to help malaria program managers resolve a well-defined problem such as improving in-country distribution, solving storage capacity problems, or carrying out quantification exercises. Even though the assignments are short-term, the emphasis is on developing capacity for the country requesting assistance, and consultants work directly with ministries of health and national malaria programs.

Over the previous six months, TO3 has provided STTA in Ghana, Liberia, Angola, Malawi and Madagascar. This assistance has focused on facilitating the receipt, clearance and distribution of large shipments of malaria commodities; performing supply chain analyses; conducting needs assessments; and coordinating future activities with Missions and the MOH, often in tandem with other organizations. For a more complete description of the project's STTA efforts, see Appendix B.

OBJECTIVE 3: IMPROVING THE GLOBAL SUPPLY OF MALARIA COMMODITIES

A. Roll Back Malaria Partnership (RBM) and the Procurement and Supply Chain Management Working Group (PSM-WG)

As a member of the Roll Back Malaria Partnership (RBM) and the Procurement and Supply Chain Management Working Group (PSM-WG), the Malaria Task Order sent participants to the PSM-WG meeting 11-12 October 2007 in Arlington, VA. The focus of the meeting was to synchronize draft work plans with the priorities determined by the RBM Partnership Board and to prioritize support for the roll-out of the Affordable Medicines Facility for malaria (AMFm), while still maintaining support for the scale-up of LLINs and indoor residual spraying (IRS). The course of action which came out of the meeting was as follows:

Dissemination of the consensus document on the harmonized quality of standards for medicines. It was agreed that the focus of the PSM-WG will be specifically on QA/QC of medicines, and will not include quality or technical specifications for other malaria commodities.

The participants also acknowledged that guidelines for RDT quality were not yet ready, and PMI is thus supporting efforts to further develop these guidelines.

Development of procurement guidelines for ACTs, RDTs, LLINs, and insecticides for IRS.

Because procurement guidelines for these commodities already exist, participants determined that what was needed was to update and endorse these guidelines, focusing first on ACTs.

Facilitate the collection of tools and lessons learned in PSM and expand the existing PSM toolbox to include malaria. While the World Bank has malaria guidelines, it has not yet created a library of PSM-WG partners' tools, nor does it provide information about the activities of these partners. Participants decided that it would be crucial to have this information, and therefore a "toolbox" will be crafted via e-mail and teleconferences.

B. Clinton Foundation activities

Forecasting. The Malaria Task Order participated in two meetings with key Clinton Foundation staff to discuss steps towards developing an ACT global demand forecasting methodology. The participants discussed methods to ensure that in-country forecasting work is credible and accurate.

Artemisinin and ACT quality issues. JSI is actively working with the Clinton HIV/AIDS Initiative (CHAI) quality experts on artemisinin and ACT quality.

Procurement and pricing. CHAI and PMI/JSI collaborated on a quantification of ACTs in Liberia to ensure that appropriate quantities were ordered.

C. Foundation for Innovative New Diagnostics (FIND) activities

Members of the Malaria Task Order participated in a February 2008 meeting with key institutions organized by FIND in Geneva, Switzerland on issues related to malaria diagnosis and the use of RDTs for diagnosis. The participants provided insights and suggestions on which areas relating to the business and market aspects of RDTs would benefit from further study and research.

D. World Health Organization (WHO) activities

The Malaria Task Order also sent participants to the "WHO Informal Consultation of the WHO-FIND Malaria Diagnostics Evaluation Programme" in Geneva, Switzerland in February 2008. The meetings covered RDT lot testing issues, and discussion further focused on PMI support of WHO-FIND on RDT lot testing expansion.

ACCOMPLISHMENTS

The first six months of FY08 initiated a new phase of work for TO3. By October, most of the new staff members were in place, the first deliveries had been made, lessons had been learned and methods and processes established. The team moved out of the introductory stage and has consistently provided quality responses to requests for forecasting and system assessment STTA, as well as the procurement and in-country distribution of malaria commodities.

Highlights of the project's support of the President's Malaria Initiative include—

- Procured commodities worth \$18,984,294 for Angola, Benin, Liberia, Malawi, Mali, Mozambique, Nigeria, Rwanda, Senegal, Tanzania, Uganda, Zambia.
- Delivered 6,340,240 treatments of malaria pharmaceuticals to five countries; 460,115 LLINs to two countries; and 1,129,000 RDTs to two countries.
- In Liberia, contributed technical assistance for door-to-door distribution of LLINs during the country's PMI launch, covering nearly 100% of the targeted population.
- In Angola, coordinated emergency in-country ACT distributions to avert pending stockouts.
- In Ghana, assessed the malaria commodities supply system and planned the implementation of those PMI-funded activities to be carried out by the project and by SPS from 2008 to 2010.
- In Mozambique, piloted a type of cool box in Maputo, Tete and Quelimane provinces to store malaria commodities, developed training materials on new protocol for malaria treatment for MOH staff and participated in a malaria working group to produce a three-year plan for addressing malaria.
- Developed wholesaler and manufacturer questionnaires which were used to help identify and ensure quality malaria commodity procurement.
- Conducted several joint assignments with SPS, including productive joint missions to Madagascar and Ghana.
- Participated in a number of international malaria meetings designed to address and improve the global supply of malaria commodities.

IMPLEMENTATION ISSUES AND SUGGESTED SOLUTIONS

As complications arise, TO3 moves quickly to identify underlying causes and propose and implement solutions. Some of the issues encountered during the reporting period include—

Quality assurance requirements. Providing safe and effective malaria commodities is a cornerstone of the Malaria Task Order. It is important to use dedicated malaria funds to provide the greatest number of commodities possible, in a short amount of time while still ensuring their overall quality. TO3 works hard to ensure that these competing priorities are in balance, and the QA team has met regularly to evaluate and revise quality procedures in order to provide good quality assurance without adding too much time or cost to a delivery. One tool that the team has developed is a questionnaire for manufacturers and wholesalers which is used as a preliminary desk audit, eliminating much of the uncertainty with procuring malaria commodities.

The QA team has also discussed alternatives to the current pre-shipment testing requirements. This is currently under review with the USAID | DELIVER PROJECT and PMI, and it is anticipated that some procedures may require revision based on these discussions. An audit of the wholesalers (IDA Foundation, MissionPharma, and UNICEF) will be conducted in the second quarter.

Freight Forwarding. Early in the project, the estimated freight spend was set at 10% of commodity value. Due to rising fuel costs, air freight spend has regularly been 15-20% of that value. The freight forwarding team has recommended that cost estimates be revised to reflect the increase, and have also looked at the feasibility of changing the mode of delivery to ocean freight for some shipments.

Availability of qualified personnel for STTA. The supply of staff and consultants with supply chain management expertise available to respond on short notice to Mission requests for strengthening logistics systems is finite. The experts who are known in this field are often booked months in advance. This reality could impede TO3's ability to respond to urgent requests for assistance. To remedy this constraint, TO3 will hire a full-time supply chain management specialist who will be available to respond directly to requests and to train others in supply chain management for malaria commodities.

Varying levels of experience with the procurement process. An ongoing issue for the TO3 team is that it works with a wide variety of people, many of whom have little experience in procurement and may not be familiar with U.S. Government regulations or the number of steps an order must go through before delivery. In addition, the ultimate recipients of these orders are usually ministries of health or national malaria control programs that have their own requirements and expectations and may also have a limited understanding of the complexities of procurement under USAID requirements.

The solution to these implementation issues will be to continue to provide more information and guidelines to all concerned and to maintain a continuous dialogue during the procurement

process. The development of additional written material for distribution to the field has been a priority, and a new document explaining ordering considerations should be ready to distribute by June of 2008.

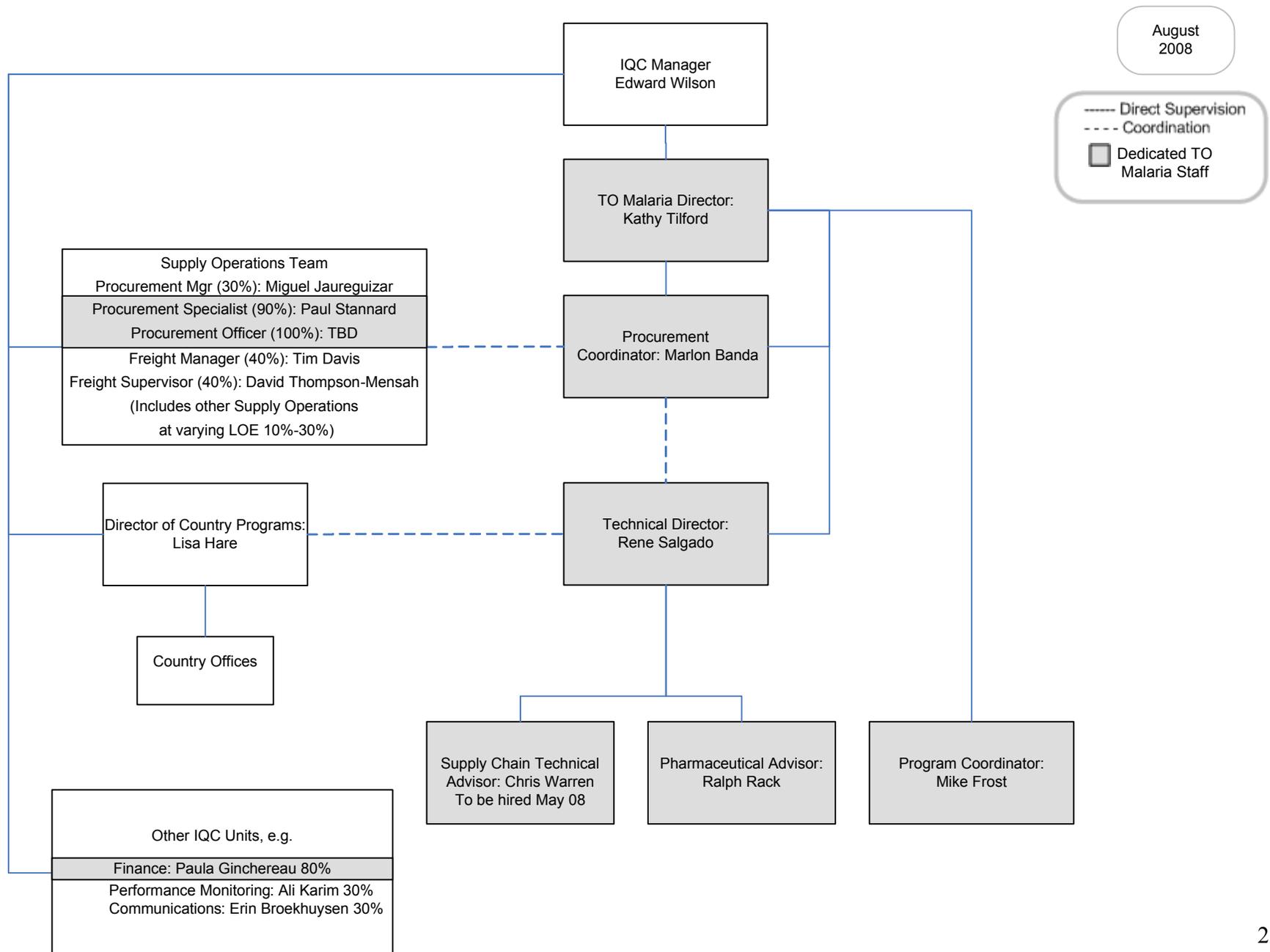
PLANNED PERFORMANCE OBJECTIVES FOR NEXT SIX MONTHS

Based on the FY08 workplan, over the next six months the malaria team will—

- Prepare product fact sheets for use by clients.
- Update the malaria catalogue for Orion.
- Perform procurement agency audits of supplier information (MissionPharma, UNICEF and IDA).
- Begin work on a capacity transfer checklist to monitor capacity-building for in-country personnel and institutions (with SPS.)
- Complete the recruitment, hiring and orientation of a Technical Director and a Supply Chain Technical Advisor.
- Update the division of roles and responsibilities within the malaria team and between the malaria team members and other IQC units.
- Finalize the quality assurance strategy and update SOPs accordingly.
- Begin the preparation of the FY2009 work plan.

APPENDICES

APPENDIX A: TASK ORDER MALARIA ORGANIGRAM



APPENDIX B: SHORT-TERM TECHNICAL ASSISTANCE (COUNTRY SUMMARIES)

Angola

(October 27, 2007 – November 10, 2007) Marlon Banda, Gustav Malangu
(December 2, 2007 – December 17, 2007) Marlon Banda

In October, Marlon Banda, the project Procurement Coordinator, traveled with Gustav Malangu, a consultant from the Fuel Group, to Angola in a visit that was designed to: establish collaborative relationships with the NMCP and other stakeholders; prepare the ground work for effective port clearance of ACTs and RDTs; and develop a clear plan on how these commodities would be stored and distributed to the 18 provinces in the country.

In December, the Procurement Coordinator returned to Angola to provide hands-on support to the NMCP and NEDP in receiving and distributing a large shipment of ACTs. The visit was used to complete agreements with a local distribution agent and review the ACT distribution plan. When the delivery of ACTs was delayed due to difficulties with the airline, the TA provider worked with local stakeholders and supported efforts to deliver emergency stocks of AL to various provinces where stock-outs of anti-malarial pharmaceuticals were anticipated.

Ghana

(January 5, 2008 – January 20, 2008) Dragana Veskov, Jaya Chimnani

In January, the Malaria Task Order sent a pair of technical advisors to Ghana to perform a joint assessment with MSH/SPS that examined the supply systems and pharmaceutical care management systems in Ghana. The team conducted a number of activities: stakeholder meetings, interviews with key participants in these systems, work planning and systems review workshops and visits to public and private sector health facilities. Following the assessment, the TA providers proposed a work plan which contained recommended strategies and activities to optimize the performance of these systems, and implementation plans were prepared for 2008 in accordance with the needs and resources identified in Ghana's MOP.

Madagascar

(March 2, 2008 – March 22, 2008) Isabelle Creamer (The Fuel Group)

A technical consultant from the Fuel Group conducted a joint assessment with MSH/SPS to help initiate PMI activities in Madagascar. The assessment was used to provide an overview of current capacities, update existing information and delineate a course of action for each project. The team developed corresponding work plans that highlighted how the different projects will be coordinating efforts and responsibilities in FY08. The visit was also used to gather information to facilitate the procurement and delivery of LLINs and RDTs in the upcoming year.

Malawi

(September 23, 2007 – October 5, 2007) Marlon Banda

(October 1, 2007 – October 14, 2007) Greg Roche

(October 14, 2007 – October 19, 2007) Phillip Kamutenga (Crown Agents)

(December 10, 2007 – December 21, 2007) Phillip Kamutenga (Crown Agents)

In the first six months of FY08, TO3 provided STTA to Malawi on several occasions, beginning in September and October with team members and consultants helping to support the arrival of a large shipment of ACTs. Following the successful receipt and clearance of the shipment, a Crown Agents consultant was sent to perform spot checks at a random sampling of health facilities in order to assess the performance of Malawi's supply chain. The information gathered in this assessment was quickly put to use in December when a second shipment of ACTs was sent to Malawi, and this same TA provider returned to facilitate clearance and distribution activities.

Liberia

(October 19, 2007 – November 2, 2007) Ralph Rack, Meba Kagone

(January 7, 2008 – April 19, 2008) Split between Meba Kagone, Janne Hicks

Polina Flahive, Marlon Banda

In October, two technical advisors from the project traveled to Liberia to assess the LLIN logistics system and prepare an action plan for LLIN distribution throughout the country. During their visit they also identified personnel and programmatic requirements for the project in the upcoming fiscal year and made preliminary decisions regarding staffing and office space for a USAID | DELIVER PROJECT office in Monrovia. Advisors returned to Liberia in January and stayed through April to assist in the implementation and administration of door-to-door LLIN distribution activities in two counties in association with the PMI launch, finalized the Liberia workplan and continued working to establish a project office.

APPENDIX C: LONG-TERM TECHNICAL ASSISTANCE (COUNTRY SUMMARIES)

A. GHANA

I. Activities

Distribution of bed nets. The USAID|DELIVER PROJECT printed 1,100,000 coupons (to be exchanged for bed nets) for the bed net distribution campaign conducted during the national maternal and child health campaign in November 2007. The coupons were produced and distributed to the identified regions in a timely manner for onward distribution to all the districts and campaign points.

The Ghana field office (FO) facilitated the transportation of 700,000 bed nets to four regions on behalf of USAID. To follow up with the delivery, the field office team conducted four monitoring visits to districts and campaign points to ensure that the bed nets were delivered and made available for the distribution. Furthermore, to assess the results of the campaign, the FO team visited both private and public community level facilities and identified issues and approaches to address them related to use of the vouchers and perception of the brand.

System assessment of the malaria policies and activities. In conjunction with MSH's Strengthening Pharmaceutical Systems project (SPS), the Malaria Task Order conducted a joint activity to assess the malaria commodities supply system and pharmaceutical care management and to develop an implementation plan of PMI-funded activities from 2008 to 2010. The team worked jointly with the NMCP, the Procurement and Supply Directorate, and the Food & Drugs Board to review the current supply systems and rational use policies.

The team identified strengths and weaknesses and developed recommendations for the efficient selection, procurement, storage, distribution, rational use, quality assurance and monitoring and evaluation of malaria commodities. Additionally, the team developed a joint implementation plan for each partner outlining roles and responsibilities and proposing activities, required inputs and resources, timelines, performance indicators and measurement methods.

The Ghana FO team was an active participant at a national stakeholder meeting to discuss the final draft of the malaria medicine policy for Ghana and advised on the information flow to the media to ensure their partnership in policy dissemination.

Training of Trainers Meeting (TOT). The USAID|DELIVER PROJECT conducted a short-term technical assistance visit to facilitate an advanced curriculum development and training of trainers for the Public Health Commodities Logistics System including malaria commodities. The team drafted refresher training modules, updated training courses and related TOT curricula, and facilitated training for 30 master trainers.

II. ACCOMPLISHMENTS

- Ad-hoc Mission requests have been successfully implemented including the transportation of bed nets and printing of vouchers on behalf of USAID in support of the maternal and child health campaign.
- The Malaria Commodities Supply and Pharmaceutical Care Management systems joint assessment report has been finalized and submitted to the Mission for comments. The report identified problems and proposed interventions for all components of the pharmaceutical management and logistics cycle.
- A training course and TOT curricula for the Public Health Commodities Logistics System have been developed and 30 master trainers trained. During the course eight potential specialist trainers (Lab, ARV, HIV test, TB) from the group of master trainers were identified for further commodity-specific training.
- The field and home office teams reviewed the workplan and budget for the Malaria Task Order and submitted them to the Mission for approval.
- A Program Officer for the project was hired and integrated into the Ghana field office team.

IMPLEMENTATION ISSUES AND SUGGESTED SOLUTIONS

During the assessment of the results of the bed net distribution campaign, a slow uptake was observed as many clients misplaced the vouchers and perceived the bed net as too hot to sleep under. The Ghana FO team advised the clinics to conduct a dialogue with MOH officials with the aim of providing bed nets to all clients within the campaign target set who visit the facilities.

During the training of trainers the participants had a variety of experiences with training and varied levels of knowledge of the Public Sector Health Commodity System and SOP manual. Throughout the workshop, some participants required additional time and assistance in order to meet the criteria for competency. Although all participants met the basic criteria by the end of the workshop, participants fell into three different skill levels in terms of their ability to conduct the three day course material.

Based on the varying skill levels of the new master trainers, it is recommended that training teams be comprised of a more experienced trainer and a less experienced trainer. This will provide the junior trainers with an opportunity to improve their skills as they train, while receiving feedback and learning new techniques from the more experienced trainer.

B. LIBERIA

I. ACTIVITIES

Bed net logistics assessment and planning for the jump start activities. The USAID | DELIVER PROJECT assisted the NMCP of the Government of Liberia Ministry of Health and Social Welfare (MOH&SW) in conducting an assessment of the bed net logistics system ,and planning for the implementation of the PMI jump start activities.

Implementation of the bed net distribution activities. Through a collaborative effort with the NMCP, MOH&SW, USAID Liberia, and PMI, project consultants implemented the following jump start activities:

The project contracted with Liberia Enterprises and Logistics Services, an agent for Vestergaard in Liberia, to clear 197,350 bed nets through customs. All bed nets were successfully transported from the port to Bomi and Cape Grand Mount Counties. The nets were transported from Monrovia and stored in contracted storage spaces at county, district and community levels. The transportation of bed nets utilized pickup trucks, canoes, motorbikes, bicycles, wheelbarrows and conveyors (people who carried nets on their heads).

The project developed stock cards and transactions forms for the transport, storage and distribution of mosquito nets, and facilitated a TOT for 22 supervisors on the use of these forms. Following the TOT, supervisors trained 287 CHWs in both counties.

The bed net distribution was implemented by CHWs through a door-to-door delivery of bed nets to every household, with three nets given per household of five. This number was adjusted according to the actual number of sleeping places found during the community assessment which was implemented prior to the distribution. The assessment was also used as an occasion for Information Education Communication and Behavior Change Communication (IEC/BCC) to raise awareness about bed net use.

NMCP staff and USAID | DELIVER PROJECT consultants carried out a total of eight supervisory visits to both counties using supervisory checklists specifically developed for this purpose. The team looked at the ongoing distribution process and ensured that the nets were distributed according to the assessment findings of the communities.

A post-activity evaluation was implemented to learn lessons from the jump start distribution. The questionnaire used was designed to obtain uniform qualitative information from respondents, and the information that was gathered gave indication that the jump start exercise was a success since all households in the counties were reached with bed nets.

Procurement, shipment, and delivery of ACTs. The USAID | DELIVER PROJECT procured and delivered 496,000 doses of ACTs in 362 cartons to the National Drug Service (NDS) in February 2008. A formal handover ceremony was organized in collaboration with the MOH&SW, NMCP, USAID Liberia and the project consultants. The USAID | DELIVER PROJECT also held meetings with the NMCP on the next ACT procurement needs.

PMI launch. The project helped the MOH&SW / NMCP to officially launch PMI in Liberia on March 14 in Tubmanburg, Bomi County. The Minister of Health and Social Welfare, Dr. Walter Gwenigale, launched PMI on behalf of President Ellen Johnson Sirleaf. Ms. Lucretia Taylor, Interim Mission Director (USAID), represented USAID at the launch event. Other NMCP partners in attendance included the Japanese Government, UNICEF, WHO, the MENTOR Initiative, and the German Government.

IMPLEMENTATION ISSUES AND SUGGESTED SOLUTIONS

Implementation of the bed net distribution activities. Using a door-to-door delivery method provided effective coverage of the targeted population, but was expensive cost-wise. The project is interested in carrying out an analysis of different LLIN distribution approaches.

The main constraint faced was that conveyors (men who carried bales) sometimes had to carry their load for long distances from storage places to households. The number of days taken to complete distribution had to be increased from 7 to 9-10 days. On-foot transport of bed nets was a recurring constraint, and more time could have been allocated for this final leg of the distribution.

The distribution provided bed nets of various sizes and shapes, rectangular and conical. The hanging of rectangular bed nets presented more difficulties than conical bed nets, and some communities were allocated only small size bed nets, which were unusable over beds larger than single size. It is suggested that the next procurement of bed nets should provide only large, conical-shaped nets.

C. MALAWI

The USAID | DELIVER PROJECT field office in Malawi is housed at Central Medical Stores (CMS). It has a staff of three technical staff, an Administrations & Finance Officer and two drivers, and provides technical assistance to Health Technical Support Service – Pharmaceutical (HTSS), Central Medical Stores and other Ministry of Health programs aimed at:

1. Strengthening of the logistics system
2. Building human capacity in logistics management
3. Improving resource mobilization and coordination for commodity security

During the period under review, the USAID | DELIVER PROJECT continued to offer technical assistance aimed at ensuring the effective implementation of the new malaria treatment rolled out by the government.

Procurement, Storage and Distribution of Artemether Lumefantrine (Coartem). The USAID | DELIVER PROJECT coordinated the procurement of over four million doses of AL which were delivered in October and December of 2007. The project also requested a modification in the Coartem packaging to allow easy identification of the four different presentations. Novartis responded by color-coding the shipping cartons.

This initial shipment of AL was expected to provide unique challenges for CMS in terms of commodity management, for the following reasons:

1. It was a new product arriving for the first time
2. The shipment contained a substantial quantity, which would require immediate processing through the central level
3. There are special handling requirements for AL, particularly regarding storage temperature, which can quickly degrade the quality of the product
4. The shipment required the use of a third-party partner for storage who is equally new to the ACT environment

The USAID | DELIVER PROJECT provided five consultants who worked with the National Malaria Control Programme (NMCP), CMS, District Health Office (DHO), MSH/SPS and other stakeholders to ensure the effective storage, repacking and distribution of the shipment, as well as a functioning drugs management information systems. The receipt and clearance procedures developed jointly between consultants provided by the USAID | DELIVER PROJECT and MSH/SPS were implemented in the planned timelines, and the USAID | DELIVER PROJECT was

able to put in place contracts that ensured custom clearance and storage of AL. Due to lack of adequate storage space at CMS and Regional Medical Stores (RMS), a third party storage facility at Cargo Management Logistics (CML) warehouse at Kamuzu International Airport was identified for short- and long-term storage of the first and second consignments. A purchase order was issued to CML for storage of the second consignment for a period of three months (25th December 2007 to 24th March 2008). Insurance coverage for the second consignment against burglary and fire was provided by NICO Insurance Company.

From the initial shipment, four months of stock (2.26 million doses) were distributed to 558 public and Christian Health Association of Malawi (CHAM) Service Delivery Points (SDP), and a one month buffer stock (346,982 doses) was sent to each of the three RMS. Of the initial facilities planned to receive AL from the initial consignment, eight were found to be non-functional. Their stocks were taken to the nearest regional medical stores.

USAID/PMI sub-contracted with CMS to distribute the first consignment. Payment was to be made at a pre-determined interval after presentation of the following deliverables, as defined in the PO issued by USAID | DELIVER:

1. Copies of signed Delivery Notes from all facilities included in the Distribution Plan, with receipt vouchers indicating the quantities and conditions of ACT each facility received.
2. A summary distribution report from each facility specifying the quantity of ACTs received, and any issues encountered during the distribution. The report should make recommendations for improving future ACT performance and indicate what resources CMS may require to improve future performance, and should also include copies of the mileage logs indicating distance traveled for the distribution of the ACTs.
3. Reports from each supervisory spot-check indicating the quantities of ACTs received by the facility, the condition of the ACTs and storage conditions.

Following the departure of the Procurement & Stores Manager, CMS had challenges in providing these deliverables. The lack of communication between the CMS management and the Procurement & Stores Manager was indicated as the main cause for the delay. A decision was made for the CMS management to be informed of all deliberations of the ACT Taskforce meetings. The USAID | DELIVER PROJECT will provide the CMS management a report every two weeks.

After the initial Coartem distribution, an assessment was carried out by members of the ACT Taskforce, which included five members of the USAID | DELIVER PROJECT. A monitoring tool was developed and used for spot-checks in 62 randomly selected facilities, beginning on October 5, 2007, with a planned end date of October 19, 2007. Due to the fact that 50% of the assessed facilities recording storage temperatures of 30°C and above, the decision was made to monitor the storage temperature over a longer period of time. The USAID | DELIVER PROJECT will procure thermometers which SPS will install in randomly selected facilities, and a temperature monitoring tool was developed by the USAID | DELIVER PROJECT for review by the ACT Taskforce.

The ACT Logistics Management Information System (LMIS). A decision was made to integrate the reporting of ACT logistics data into the existing LMIS. LA consumption data at SDP will be collected using an ACT Daily Activity Register, and the consumption data and other logistics data sets will be reported to the DHO by the fifth of each month using the LMIS 01 tool. With the upgrading of the Supply Chain Manager still ongoing, the USAID | DELIVER PROJECT designed

Excel-based LA tracking tools and corresponding job aids to enable facilities and regional medical stores to base re-supply orders on need. The DHO will then report and place orders to RMS by the tenth of each month using the ACT Products Tracking Form and District ACT Products Re-Supply Order Form. RMS I/C and District Pharmacy Technicians were trained on the use of the tools during the physical inventory exercise. The RMS then aggregates the district data and places orders to CMS by the 15th of each month using the RMS LA Products Order Form. By January 15, 2008, no reports had been received at CMS. Follow-up telephone calls resulted in 7 districts sending reports. It is important to note that most of the facilities did not start the use of LA until mid-December 2007, which may have contributed to the low reporting rate.

Analysis of the data from the seven districts may indicate the use of tablets (as opposed to treatments) as the unit of issue. This assumption will be tested during supervisory visits planned for the next quarter.

D. MOZAMBIQUE

Activities

Monitoring Pilot of the cool box. The USAID | DELIVER PROJECT is piloting a type of cool box in Maputo, Tete and Quelimane provinces to store malaria commodities that require storage temperatures at 25 degrees Celsius or cooler. The project monitors the cool boxes by verifying its use by staff, and determining how well they use the thermometers to collect data on the temperature and humidity inside and outside the box.

Development of the training materials on new protocol for malaria treatment. The first draft of the training manual was produced by the project and incorporated comments from the Director of the Malaria Program at the MOH. The project is working with the Malaria Program to organize a workshop with all stakeholders involved in malaria activities to discuss the first draft and collect comments to finalize the training materials. The workshop is scheduled for April 3-4, 2008.

Meeting on AL distribution system for levels receiving Kits A, B, C. The project had a joint meeting with CMAM, PNCM, WHO and USAID/PMI on February 22 to discuss the appropriate system for distribution of AL to the levels receiving Kits A, B, C. Two options were presented and discussed during the meeting, a “push” and a “pull” system. The advantages and disadvantages of each system were presented and discussed and the group decided to pilot the two options in selected districts from May-July in order to inform a decision on the appropriate system for distribution of AL in 2009.

The plan is to start the pilot in May 2008 together with the pilot of the malaria training materials. The pilot will be conducted in Zambezia and Niassa provinces, in which two districts in each province will be selected, and all the health facilities in both districts will be covered. The project will be meeting with the Malaria Program and CMAM during the first week in April to decide on the second line regimen the pilot sites will be using since the second line drug in the new protocol is not yet available.

Three year business plan for the malaria program. The project participates in the working group on the development of a three year business plan for the malaria program in Mozambique. The project hosted two meetings with the sub-group “Logistics and Procurement of Malaria

Commodities.” The project has been tasked to work with CMAM to quantify the malaria drugs needs for 2009 and 2010 to include in the business plan. The project has started working on the malaria drugs forecast for 2009 and 2010.

E. TANZANIA

In Tanzania, the USAID | DELIVER PROJECT works with government counterparts, primarily the Pharmaceutical Supplies Unit (PSU), the NMCP, Medical Stores Department (MSD), and the Zanzibar Malaria Control Programme to improve anti-malarial commodity availability.

On the mainland, the shift from monotherapy to ACTs has required the project’s technical assistance in monitoring distribution of Coartem, discussing modalities of integrating Coartem into the Integrated Logistics System (ILS), and transitioning Coartem from a centrally-managed “push” system to a facility-level-driven “pull” system. In addition to facilitating the design and management of this transition, the USAID | DELIVER PROJECT has developed a short refresher course on filling out the AL Research & Related (R&R) forms and proper use of the stores ledger to prepare service providers to start placing their own orders in April. PSU has presented this course to district-level pharmacists, medical officers, and malaria focal points from regions and to members of the Morogoro Municipal Council.

The USAID | DELIVER PROJECT also supported the NMCP in designing a monitoring and supervision tool that has now been used in 16 out of 21 regions, producing aggregated data from 180 facilities for each of the AL weight bands, as well as data for other anti-malaria treatments (SP, quinine). This tool is now being used to regularly monitor stock status.

While SP availability continues to be a challenge, the project has provided assistance in managing practical solutions to reduce SP shortages in certain regions. This involved organizing and quantifying for a one-time push of SP treatments to districts in at-risk or stocked-out regions.

To improve product availability in the private sector, the USAID | DELIVER PROJECT was involved in brokering a transfer of Coartem from the Accredited Drug Dispensing Outlet (ADDO) program to a pilot initiative managed by the Clinton Foundation to make Coartem available through chemist shops at a highly-subsidized price. As uptake through the ADDO program has been slower than expected, this transfer decreased the risk of expiries without jeopardizing availability for the ADDOs.

The USAID | DELIVER PROJECT is also preparing for the first annual quantification of anti-malarials scheduled for mid-April. This quantification and procurement planning exercise will be conducted in collaboration with Tanzania’s National Malaria Control Program. Databases for the ADDO and UNHCR will also be prepared.

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**APPENDIX D: COMMODITY PROCUREMENT
INFORMATION FORMS**

COARTEM COMMODITY PROCUREMENT INFORMATION REQUEST FORM

Task Order 3 - Malaria

TITLE: ACTs / Coartem Commodity Procurement Information Request	DOCUMENT No.: DEL-PRO-COMM-03	Requesting Country:	Date:
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PURPOSE

The purpose of this document is to provide product, consignee and country information necessary for procurement, freight, inland clearing and handling. Additionally, all information indicated will be used to create a request for quote and sent to all USAID | DELIVER PROJECT prequalified manufacturers that meet the specifications.

Costs will be provided to you on the basis of the information you provide and will include costs for the commodities and shipping and handling. S&H costs include estimated freight, insurance, clearance, pre-shipment inspection and surcharge.

Product Information

Please indicate item(s) needed below. If a variation from the standard item is needed, please provide details of your preferred specifications.

Item Number	Item Name	Quantity	Variation Required (please provide rationale)
100004	Artemether/Lumefantrine 20mg/120mg, Pill, 6x1 Blister Pack, 30treatments		
100005	Artemether/Lumefantrine 20mg/120mg, Pill, 6x2 Blister Pack, 30treatments		
100006	Artemether/Lumefantrine 20mg/120mg, Pill, 6x3 Blister Pack, 30treatments		
100007	Artemether/Lumefantrine 20mg/120mg, Pill, 6x4 Blister Pack, 30treatments		

NOTE : For Quantity please specify whether the number entered is for units, packs, kits, treatments or other unit of measure

Packaging and Labeling Requirements

Please review and indicate your acceptance or otherwise provide details of your preferred specifications

	Standard Label Specifications	Accepted (Please check box)	Variation Required (please provide rationale)
Markings:	Tertiary (outer shipping unit) packaging, on three adjacent sides with the PMI Logo.		

In Country Distribution or Other Logistics Activities

For any activities or assistance needed for this order which will utilize commodity funds, please indicate the activities that will be performed, the dates during which the activities will take place and the planned budget for those activities.

Activities	Dates	Planned Budget

Delivery Information

Delivery information must be complete in order to fulfill order request. **Please do not reference a PO Box**, physical addresses only. (However, if this information is not yet known, please send this form in with the above information filled in so order preparation can begin.)

Ship To:			
Name:		State/Province:	
Address:		Country:	

City:		Postal Code:	
Consign To: (Please state whether Consignee will arrange Customs clearance – if not please give details of responsible party in the Special Delivery Instructions below)			
Agency Name:			
Contact Name:		State/Province:	
Address:		Country:	
City:		Postal Code:	
e-mail:		Phone:	
			Fax #:
Desired Delivery Date:			
Special Delivery Instructions (optional):			
Client Information: (Client refers to the agency or party funding the procurement. For example: 'USAID – Angola'.)			
Agency Name:		State/Province:	
Address:		Country:	
City:		Postal Code:	
Contact Name:		Phone #:	
Fax #:		E-mail address:	

Signed (by requesting mission/organization)

Name

Title

Signature

Date

Countersigned (by the recipient organization e.g. Ministry of Health, Malaria Control Program)

Name

Title

Signature

Date

Name of Requesting/Recipient Organization

Official Stamp

LLIN COMMODITY PROCUREMENT INFORMATION REQUEST FORM

Task Order 3- MALARIA

TITLE: Bed Nets Commodity Procurement Information Request	DOCUMENT No.: DEL-PRO-COMM-01	Requesting Country:	Date:
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PURPOSE

The purpose of this document is to provide product, consignee and country information necessary for procurement, freight, inland clearing and handling. Additionally, all information indicated will be used to create a request for quote and sent to all USAID | DELIVER PROJECT prequalified manufacturers that meet the specifications.

Costs will be provided to you on the basis of the information you provide and will include costs for the commodities and shipping and handling. S&H costs include estimated freight, insurance, clearance, quality assurance and surcharge.

Product Information

Please review and indicate your acceptance or otherwise provide details of your preferred specifications

	Standard Specifications	Accepted (Please check box)	Variation Required (please provide rationale)
Net material:	Polyethylene or Polyester <i>(Please check box if either material is acceptable. If not, please indicate which material is required.)</i>		
Net shape:	Rectangular		
Colors:	White		
Impregnation:	Long lasting ITNs		
Impregnation insecticide:	Any WHOPEs recommended impregnation insecticide		
Dimensions:	<i>See below for product list. Please indicate size required in next box.</i>		

Quantity Desired:		Desired Delivery Date:	
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Packaging and Labeling Requirements

Please review and indicate your acceptance or otherwise provide details of your preferred specifications

	Standard Specifications	Accepted (Please check box)	Variation Required (please provide rationale)
Markings:	Bale (tertiary packaging), on three adjacent sides with the PMI Logo.		

In Country Distribution or Other Logistics Requirements

For any activities or assistance needed for this order which will utilize commodity funds, please indicate the activities that will be performed, the dates during which the activities will take place and the planned budget for those activities.

Activities	Dates	Planned Budget

Delivery Information

Delivery information must be complete in order to fulfill order request. **Please do not reference a PO Box**, physical addresses only. (However, if this information is not yet known, please send this form in with the above information filled in so order preparation can begin.)

Ship To:					
Name:		State/Province:			
Address:		Country:			
City:		Postal Code:			
Consign To: (Please state whether the Consignee will arrange Customs clearance – if not please give details of responsible party in the Special Delivery Instructions below)					
Agency Name:					
Contact Name:		State/Province:			
Address:		Country:			
City:		Postal Code:			
e-mail:		Phone:		Fax #:	
Special Delivery Instructions (optional):					
Client Information: (Client refers to the agency or party funding the procurement. For example 'USAID – Angola'.)					
Agency Name:		State/Province:			
Address:		Country:			
City:		Postal Code:			
Contact Name:		Phone #:			
Fax #:		E-mail address:			

NOTE: The USAID | DELIVER PROJECT has pre-qualified the following six LLIN manufacturers:

BASF	-	Interceptor ®
Bestnet Europe (Intection)	-	Netprotect ®
Clarke Mosquito	-	DuraNet ®
Sumitomo Chemical	-	Olyset ®
Tana Netting	-	DawaPlus ®
Vestergaard Frandsen	-	PermaNet ®

All of these manufacturers have, as a minimum, WHOPES Stage I approval. Please give below a brief statement confirming the WHOPES status LLIN that is required and the reason why – e.g. National Malaria Control Program standards require a WHOPES level of _____

Signed (by requesting mission/organization)

Name

Title

Signature

Date

Countersigned (by the recipient organization e.g. Ministry of Health, Malaria Control Program)

Name

Title

Signature

Date

Name of Requesting/Recipient Organization

Official Stamp

LLIN Product List

Material	Insecticide	Strength	Size	Color	Shape	Ordering Unit
Polyethylene	Permethrin	150 denier	100cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Permethrin	150 denier	130cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Permethrin	150 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Permethrin	150 denier	190cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Alpha-cypermethrin	145 denier	70cm x 150cm x 180cm	White	Rectangular	Piece
Polyethylene	Alpha-cypermethrin	145 denier	100cm x 150cm x 180cm	White	Rectangular	Piece
Polyethylene	Alpha-cypermethrin	145 denier	130cm x 150cm x 180cm	White	Rectangular	Piece
Polyethylene	Alpha-cypermethrin	145 denier	160cm x 150cm x 180cm	White	Rectangular	Piece
Polyethylene	Alpha-cypermethrin	145 denier	190cm x 150cm x 180cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	130cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	130cm x 180cm x 170cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	160cm x 180cm x 170cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	190cm x 180cm x 150cm	White	Rectangular	Piece
Polyethylene	Deltamethrin	100 denier	190cm x 180cm x 170cm	White	Rectangular	Piece
Polyester	Deltamethrin	75 denier	70cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	75 denier	100cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	75 denier	130cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	75 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	75 denier	190cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	100 denier	70cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	100 denier	100cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	100 denier	130cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	100 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Deltamethrin	100 denier	190cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Alpha-cypermethrin	75 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Alpha-cypermethrin	75 denier	190cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Alpha-cypermethrin	100 denier	160cm x 180cm x 150cm	White	Rectangular	Piece
Polyester	Alpha-cypermethrin	100 denier	190cm x 180cm x 150cm	White	Rectangular	Piece

RDT COMMODITY PROCUREMENT INFORMATION REQUEST FORM

Task Order 3 - Malaria

TITLE: RDTs Commodity Procurement Information Request	DOCUMENT No.: DEL-PRO-COMM-02	Requesting Country:	Date:
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PURPOSE

The purpose of this document is to provide product, consignee and country information necessary for procurement, freight, inland clearing and handling. Additionally, all information indicated will be used to create a request for quote and sent to all USAID | DELIVER PROJECT prequalified manufacturers that meet the specifications.

Costs will be provided to you on the basis of the information you provide and will include costs for the commodities and shipping and handling. S&H costs include estimated freight, insurance, clearance, quality assurance and surcharge.

Product Information

Please indicate item(s) needed below. If a variation from the standard item is needed, please provide details of your preferred specifications.

Item Number	Item Name	Quantity No of tests	Variation Required (please provide rationale)

NOTE : Tests are normally supplied in kits of 25 or 50 tests each, dependant upon the manufacturer

Packaging and Labeling Requirements

Please review and indicate your acceptance or otherwise provide details of your preferred specifications

	Standard Label Specifications	Accepted (Please check box)	Variation Required (please provide rationale)
Markings:	Tertiary (outer shipping unit) packaging, on three adjacent sides with the PMI Logo.		

In Country Distribution or Other Logistics Requirements

For any activities or assistance needed for this order which will utilize commodity funds, please indicate the activities that will be performed, the dates during which the activities will take place and the planned budget for those activities.

Activities	Dates	Planned Budget

Delivery Information

Delivery information must be complete in order to fulfill order request. **Please do not reference a PO Box**, physical addresses only. (However, if this information is not yet known, please send this form in with the above information filled in so order preparation can begin.)

Ship To:			
Name:		State/Province:	
Address:		Country:	
City:		Postal Code:	
Consign To: (Please state whether Consignee will arrange Customs clearance – if not please give details of responsible party in the Special Delivery Instructions below)			
Agency Name:			

Contact Name:		State/Province:	
Address:		Country:	
City:		Postal Code:	
e-mail:		Phone:	
		Fax #:	
Desired Delivery Date:			
Special Delivery Instructions (optional):			
Client Information: (Client refers to the agency or party funding the procurement. For example 'USAID – Angola'.)			
Agency Name:		State/Province:	
Address:		Country:	
City:		Postal Code:	
Contact Name:		Phone #:	
Fax #:		E-mail address:	

NOTE: The USAID | DELIVER PROJECT has pre-qualified the following six RDT manufacturers:

- Access Bio - CareStart ®
- ICT South Africa - Malaria Pf ®
- Inverness Medical - BinaxNOW ®
- Orchid Biomedical Systems - ParaCheck ®
- Span Diagnostics - ParaHIT ®
- Standard Diagnostics - Bioline ®

All of these manufacturers have, as a minimum, provided evidence of satisfactory GMP. If you have stated a preference for a particular RDT please give below a brief statement of explanation for your choice.

Signed (by requesting mission/organization)

Name

Title

Signature

Date

Countersigned (by the recipient organization e.g. Ministry of Health, Malaria Control Program)

Name

Title

Signature

Date

Name of Requesting/Recipient Organization

Official Stamp

For more information, please visit deliver.jsi.com.

USAID | DELIVER PROJECT

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