

PD-ABR-D26

99951

**RATIONAL PHARMACEUTICAL MANAGEMENT PROJECT  
PROPOSED ANNUAL WORK PLAN  
SEPTEMBER 24, 1998 TO SEPTEMBER 23, 1999**

**September 15, 1998**

Management Sciences for Health

Rational Pharmaceutical Management Project  
C A No HRN-A-00-92-00059-13  
Russia Rational Pharmaceutical Management Project  
C A No HRN-A-00-95-00002

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## LIST OF ACRONYMS

ACF	Allocable Cost Factor
AM	Anti-Microbial
AMR	Anti-Microbial Resistance
APHA	American Public Health Association
APHIA	AIDS, Population and Health Integrated Assistance Project (Kenya)
ARDIN	All Russia Drug Information Network
BASICS	Basic Support for Institutionalizing Child Survival
CAIDP	Central Asia Infectious Diseases Program
CBO	Community Based Organization
CBOH	Central Board of Health (Zambia)
CDC	Centers for Disease Control
CES	Cost Estimate Strategy
CIDA	Canadian International Development Agency
CPS	Capacitação-Planificação-Supervisão (MTP in Mozambique)
D&T	Drugs and Therapeutics
DDA	Department of Drug Administration (Nepal)
DILSAT	District Integrated Logistics Self-Assessment Tool (Zambia)
DMCI	Drug Management for Childhood Illness
DSF	Drug and Medical Supply Fund (Zambia)
DUR	Drug Utilization Review
EDL	Essential Drugs List
EDMSS	Essential Drugs and Medical Supplies Store
EHP	Environmental Health Project (Nepal)
EPI	Extended Program on Immunizations
ESP	Essential Services Package (Bangladesh)
FP	Family Planning
FPLM	Family Planning Logistics Management
FPMD	Family Planning Management Development
GC	Green Cross (Hungary)
GHC	Global Health Council
HSMTC	Health Service Management Training Centre (Hungary)
ICDDR,B	International Centre for diarrheal Disease Research, Bangladesh
ID	Infectious Disease
IHCAR	Division of International Health Care Research (Karolinska Institute)
IMCI	Integrated Management of Childhood Illness
INRUD	International Network for Rational Use of Drugs
JSI	John Snow International
LA/C	Latin America/Caribbean
MDS	Managing Drug Supply
MMR	Movimiento Manuela Ramos (Peru)
MOH	Ministry of Health
MSH	Management Sciences for Health
MTP	Monitoring-Training-Planning
NAPHRA	National Public Health Regulatory Authority (Zambia)
NCIH	National Council on International Health

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NDF	National Drug Formulary
NGO	Non-Governmental Organization
NID	National Immunization Day
NIPHP	National Integrated Population Health Program (Bangladesh)
NIS	Newly Independent States
OR	Operations Research
PA	Program Associate
PAHO	Pan American Health Organization
PATH	Program for Appropriate Technology in Health
PHC	Primary Health Care
RDF	Revolving Drug Fund
RDU	Rational Drug Use
REDSO	Regional Economic Development Support Office
RH	Reproductive Health
RLI	Regional Logistics Initiative
RPM	Rational Pharmaceutical Management
SIDA	Swedish International Development Agency
SOTA	State Of The Art
SO	Strategic Objective
SPA	Senior Program Associate
STD	Sexually Transmitted Disease
STG	Standard Treatment Guideline
TA	Technical Assistance
TB	Tuberculosis
TBD	To Be Determined
TDRC	Tropical Diseases Research Centre (Zambia)
TOT	Training of Trainers
URMES	Uso Racional de Medicamentos en Escuelas Saludables
USAID	United States Agency for International Development
USP	United States Pharmacopeia
WHO	World Health Organization
WHO/AFRO	World Health Organization/African Region
WHO/CHD	World Health Organization/Child Health Division
WHO/DAP	World Health Organization/Action Programme on Essential Drugs
WHO/EURO	World Health Organization/European Region

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## INTRODUCTION

The Management Sciences for Health (MSH) Rational Pharmaceutical Management (RPM) Project was designed as an innovative project to develop new tools and approaches in drug management. Since the project's start in September 1992, RPM has developed many tools and technical approaches. Demand has increased for technical assistance and further development, adaptation, and dissemination of these innovative tools and approaches. As RPM's recent increase in funding ceiling shows, RPM has grown to meet the demand of new initiatives and Mission requests. The activities proposed in this final project work plan are intended to consolidate the development of tools for new initiatives, and bring to closure sustainable country programs.

RPM's original completion date was September 1997. In mid-1997, MSH submitted a request to USAID to extend the end-date of RPM to September 23, 1999, primarily because it was felt that additional time was needed to complete a variety of core-funded and country program level activities. At the same time, MSH requested that the funding ceiling be raised from \$8,900,000 to \$13,607,000 in order to accommodate proposed Mission and Bureau support for existing activities and new initiatives. At the request of the RPM CTO, MSH submitted an additional request to raise the funding ceiling to \$15,300,000. These requests were approved by USAID on November 19, 1997 and the ceiling was raised to \$15,265,666.

To-date, USAID has obligated \$13,819,311 to RPM. Based on information provided by USAID, RPM expects USAID to obligate another \$1,282,500. RPM's proposed package of activities for the period September 24, 1998, to September 23, 1999, is budgeted at \$4,754,253. RPM would therefore require an additional \$136,923 in funds to complete all activities. Individual funding levels and budgets are shown in the table *Estimated Costs and Funds*.

RPM projects a total level of effort during the period September 24, 1998, to September 23, 1999, of 264 staff person months. RPM will also engage 59 months of consultant time. Please see the table *Level of Effort and Travel* for details.

Core and regional bureau-funded activity work plans are composed of a matrix and time line, and cover the period September 24, 1998 to September 23, 1999. Each country work plan is composed of a matrix, time line, and text detailing expected end-of-project needs. Country work plans were developed in June 1998, and therefore cover the periods June 1, 1998 to September 23, 1998, and September 24, 1998 to September 23, 1999. All work plans assume a project end date of September 23, 1999 and include costs to bring each activity to closure.

Each matrix includes information on the technical activity, outputs, collaborating organizations, USAID strategic objectives, MSH staff and consultants, their level of effort, travel, additional expenses, and cost by activity. Note that Mission strategic objectives are referenced in country work plans and Global Bureau strategic objectives are used in core and regional bureau work plans.

Each time line includes all technical activities, technical areas, and modes of implementation. The "X" denotes the month each activity is completed. The list of technical areas and modes of implementation follow.

### **Codes for Technical Areas**

SEL	Selection
PRO	Procurement
DIS	Distribution
RDU	Rational Drug Use
PAR	Policy and Regulation
MIS	Management Information Systems
HRD	Human Resource Development
FIN	Financing
DIN	Drug Information
PRM	Program Management

### **Codes for Modes of Implementation**

POL	Policy Development and Implementation
IND	Indicator-Based Assessment and Monitoring
TRN	Training
OPR	Operations Research
DFS	Direct Financial Support
DTA	Direct Technical Assistance
TDV	Tools Development
INF	Information Dissemination
CSM	Communications and Social Marketing
DCC	Donor Coordination and Collaboration

<b>Rational Pharmaceutical Management Project</b>					
<b>Estimated Costs and Funds</b>					
<b>Reflecting the Period Sep 24, 1998 - Sep 23, 1999</b>					
	<b>Pipeline as of Sep 24, 1998</b>	<b>Funding Expected*</b>	<b>Funds Available</b>	<b>Budget (Sep 24, 98 - Sep 23, 99)</b>	<b>Surplus/ (Shortfall)</b>
<b>Global Bureau Funds</b>					
<b>Core</b>					
IMCI				66,944	
Info				164,078	
MDS				34,000	
ReproHealth				184,955	
TechLead				175,320	
Tools				86,470	
Closedown				172,622	
<b>Total Core</b>	<b><u>\$591,775</u></b>	<b><u>250,000</u></b>	<b><u>841,775</u></b>	<b><u>884,389</u></b>	<b><u>(42,614)</u></b>
<b>Field Support</b>					
AFRO	\$0	400,000	400,000	398,161	1,839
AFRO ID	\$0	100,000	100,000	95,524	4,476
AMR	(\$102,932)	702,500	599,568	599,212	356
Ecuador	(\$475,347)	367,000	(108,347)		(108,347)
Bangladesh	(\$17,793)	100,000	82,207	79,856	2,351
Honduras	\$0	30,000	30,000	30,005	(5)
Hungary	(\$124,649)	250,000	125,351	135,836	(10,485)
LA/C ID	\$0	200,000	200,000	199,848	152
Mozambique	\$135,537	360,000	495,537	490,597	4,940
Nepal	(\$1,927)	545,000	543,073	539,411	3,662
Peru	(\$79,920)	250,000	170,080	147,318	22,762
Polio	\$75,210		75,210	70,630	4,580
REDSO	(\$9,661)	200,000	190,339	185,924	4,415
Zambia	\$15,038	150,000	165,038	168,337	(3,299)
<b>Country Support</b>					
Poland	(\$16,654)		(16,654)		(16,654)
CAIDP	(\$5,263)		(5,263)		(5,263)
<b>Add-ons</b>					
Ukraine	\$293,128		293,128	299,469	(6,341)
Mozambique	\$250	0	250		250
<b>Tin Cup</b>					
Central Asian Republics				189,889	
Moldova				165,717	
NIS TBD				52,401	
Russia				21,729	
<b>Total Tin Cup</b>	<b><u>\$436,038</u></b>	<b><u>0</u></b>	<b><u>436,038</u></b>	<b><u>429,736</u></b>	<b><u>6,302</u></b>
<b>Total RPM</b>	<b><u>\$712,830</u></b>	<b><u>\$3,904,500</u></b>	<b><u>\$4,617,330</u></b>	<b><u>\$4,754,253</u></b>	<b><u>(\$136,923)</u></b>

\* USAID obligated \$2 622 000 of the expected \$3 904 500 on August 26 1998

RPM Work Plan Budget

Level of Effort and Travel (Sep 24, 1998 Sep 23, 1999)

	I M C I	I N F O D I S S	M D S T R A I N I N G	R E P R O H E A L T H	T E C H L E A D E R S H I P	T O O L S D E V E L O P M E N T	C L O S E D O W N	A F R I C A	A F R I C A I D	A M R	B A N G L A D E S H	H O N D U R A S	H U N G A R Y	L A / C I D	M O Z A M B I Q U E	N E P A L	P E R U	P O L I O	R E D S O	Z A M B I A	U K R A I N E	C A R	M O L D O V A	N I S	R U S S I A	A D M I N A C F	V A C A T I O N	T O T A L			
<b>MSH Staff Level of Effort</b>																															
<b>A RPM Technical Staff</b>																															
Savelli	3	22	0	0	12	4	18	8	12	12	4	0	7	0	1	10	0	0	1	3	3	18	13	4	3	76	15	249			
Beracochea	4	11	0	18	11	2	18	6	0	6	0	0	0	0	5	0	0	5	5	5	0	0	0	0	97	30	223				
Moore	0	2	0	0	2	2	9	0	0	0	0	0	0	0	197	0	0	3	0	0	0	0	0	0	24	10	249				
Gabra	0	3	0	0	9	2	9	78	0	0	0	0	0	0	0	0	0	3	47	59	0	0	0	0	24	15	249				
Keene	26	4	0	0	5	2	4	54	0	0	0	0	0	0	0	132	0	0	0	0	0	0	0	0	12	10	249				
McFadyen	5	70	0	3	19	20	15	8	11	0	0	0	1	0	4	0	0	3	0	23	2	2	2	0	12	32	234				
Zagorski	0	2	0	0	3	2	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	49	51	28	64	10	11	20	249		
Duzey	0	2	0	0	6	2	9	0	0	0	0	0	0	0	0	0	0	0	0	0	90	0	0	14	4	24	21	172			
Dias	0	2	0	0	0	0	3	30	0	0	0	0	0	0	0	60	0	0	0	0	0	0	0	0	12	15	122				
Fujisaki	0	2	0	93	2	0	9	0	0	0	0	45	0	0	0	0	0	0	0	0	0	0	0	0	24	20	195				
Nelson	4	2	0	0	0	0	3	0	0	0	20	20	0	0	0	0	30	3	0	2	0	0	0	12	15	111					
Callender	10	2	0	0	2	2	3	0	0	105	0	0	0	0	0	0	0	0	0	0	2	0	47	0	24	15	212				
Utshudi	0	2	0	0	15	2	9	60	40	0	49	0	0	0	25	0	0	0	0	0	0	0	0	24	10	236					
Burn	4	2	0	0	17	19	9	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	48	15	118					
SPA TBD	0	2	0	4	0	0	6	0	0	74	0	0	0	0	0	43	0	0	0	0	19	0	0	52	15	215					
Jones	0	0	0	0	0	0	20	0	0	0	0	0	0	0	5	0	0	0	1	2	0	0	0	201	20	249					
Chomyszak	0	0	0	0	3	0	15	0	0	0	0	0	0	0	0	0	0	0	0	0	14	0	0	200	15	247					
Vincent	0	3	0	0	0	0	15	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	221	10	249					
<b>B DMP Technical Staff</b>																															
Rankin	0	0	0	0	5	3	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	50	15	83					
PA TBD	0	33	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	51	15	101					
Lee	2	2	0	0	9	3	3	2	4	137	0	0	0	20	0	40	0	0	4	2	0	0	0	0	0	21	249				
Miralles	1	41	25	0	19	4	3	8	8	63	1	0	3	40	3	0	0	0	0	2	4	5	1	0	6	10	249				
Pinell	8	0	0	0	0	0	3	0	0	88	0	0	0	70	0	0	0	52	0	0	0	0	0	12	15	248					
<b>C MSH Technical Staff</b>																															
Newbrander	0	2	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6				
Sanchez	0	0	0	27	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	27				
Donaldson	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5				
Coburn	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Sacca	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	24	0	0	0	0	0	0	0	0	0	24				
Ickx	4	0	0	0	0	0	0	24	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	28				
<b>D RPM Support Staff</b>																															
Cullen	0	0	30	0	0	5	15	0	0	0	12	3	16	0	0	55	0	0	0	0	0	0	0	98	15	249					
Adams	0	0	15	0	5	0	15	0	0	0	0	0	0	0	60	0	19	0	0	0	40	0	21	0	99	15	289				
Crook	0	0	0	46	0	0	15	0	0	0	0	0	0	0	0	0	0	0	22	31	0	18	0	98	15	245					
Parker	16	36	0	0	18	6	5	31	23	100	0	0	0	30	0	0	0	5	0	0	18	0	5	65	15	373					
Schiess	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	234	15	249					
Total Salaries & Wages	87	247	70	196	168	80	252	309	98	585	86	27	72	160	300	340	73	74	80	129	223	94	109	103	26	1 811	5,799				
Total Consultants	0	0	0	36	4	43	0	9	10	0	8	0	20	0	622	45	130	18	64	176	54	34	21	0	0	0	1,294				
Airfare (# trips)	0	1	0	8	5	0	6	15	3	14	3	2	3	24	5	18	8	5	8	7	10	17	8	0	0	18	188				
Per Diem (# days)	8	2	0	38	25	0	6	262	45	190	29	28	37	334	192	252	77	54	108	114	162	124	65	0	0	18	2,170				
Avg Trip Length	n/a	2	n/a	5	5	n/a	1	17	15	14	10	14	12	14	38	14	10	11	14	16	16	7	8	n/a	n/a	1	12				

IMCI								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Home Office Project Management	WHO		D Keene S Parker	5 5			\$5,209
2	Completion of DMCI Manual	WHO PAHO BASICS		D Keene T Savelli E Beracochea D Lee V Pinell D Callender R Burn P Ickx J McFadyen S Parker	12 1 1 2 6 4 4 4 2 5			\$29,565
3	Completion of Bolivia Report	DMCI assessment report		D Keene V Pinell T Savelli E Beracochea M Miralles J McFadyen S Parker	2 5 1 1 1 1 2		Translation (\$4,725)	\$11,317
4	Preparation of PAHO Presentation for WHO Meeting	Presentation materials		WHO PAHO BASICS	D Keene V Pinell E Beracochea D Callender J McFayden S Parker	1 2 1 2 1 1		\$4,761

IMCI								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
5	Presentations and Dissemination of DMCI Tool (presentation at two international conferences)	Presentation materials	WHO PAHO BASICS		D Keene T Savelli E Beracochea D Nelson S Parker D Callender J McFayden	6 2 2 4 3 4 2	DC-Geneva (4)  DC-Panama (3)	\$16,092

**IMCI**

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Completion of DMCI Manual	RDU	IND						X										
2 Completion of Bolivia Report	RDU	IND					X											
3 Preparation of PAHO Presentation for WHO Meeting	RDU	INF					X											
4 Presentation and Dissemination of DMCI Tool	RDU	INF										X						

INFORMATION DISSEMINATION								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Contribute to USAID Web Site			PA TBD A Savelli D Keene	6 2 2			\$5,691
2	RPM Project Reports			A Savelli PA TBD S Parker E Beracochea C Vincent	5 16 5 5 3			\$17,551
3	<i>RPM Updates for INRUD News</i>	Two <i>RPM Updates</i>	INRUD	J McFadyen M Gabra E Beracochea	1 1 1		Copies	\$2,357



INFORMATION DISSEMINATION								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
7	Technical Report Production	Reports		PA TBD M Miralles	24 36			\$39,245

**INFORMATION  
DISSEMINATION**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Contribute to USAID Web Site	All	TDV					X							
2 RPM Project Reports	PRM	INF												X
3 RPM Updates to INRUD News	All	INF						X						
4 Lessons Learned Series	All	INF				X								
5 Responding to Requests for Information	All	INF												X
6 Close Out/Archive Activities	All	INF												X
7 Report Production	All	INF												X

MANAGING DRUG SUPPLY TRAINING SERIES									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
1	Development of MDS training series	Training series of 24 modules	WHO		M Miralles I Adams T Cullen	25 15 30		Materials, workshop expenses	\$34,000

**MDS Training Series**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Development of MDS Training Series	HRD	TRN										X		

REPRODUCTIVE HEALTH								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Complete the Analysis of Kenya Field Test Data	Kenya MOH		T Fujisaki M P Sanchez M Thuo J Crook D Ross-Degnan	10 2 2 2 1			\$8,659
2	Organize and Conduct the CES Workshop in Kenya	Kenya MOH MotherCare		T Fujisaki D Ross-Degnan M Thuo J Crook	20 10 20 2	Boston-Nairobi (16) Boston-Nairobi (10)	Local expenses for workshop (\$11,400)	\$65,176
3	Complete Revisions of CES Spreadsheets			T Fujisaki D Ross-Degnan R Wilson J Crook J McFadyen	10 5 8 5 2			\$17,370
4	Write CES Guide Volume I	MotherCare		T Fujisaki E Beracochea M P Sanchez D Donaldson M Thuo J Crook D Ross-Degnan J McFadyen	10 5 7 2 2 5 2 1	Boston-DC (2)		\$21,760

## REPRODUCTIVE HEALTH

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
5	Write CES Guide Volume II	•CES Guidebook Volume II •Diskette on "How to Conduct the CES Survey"	MotherCare		T Fujisaki E Beracochea M P Sanchez D Donaldson J Crook D Ross-Degnan J McFadyen M Miralles	15 1 7 2 5 5 1 2		\$22,336
6	Write CES Guide Volume III	•CES Guidebook Volume III • Diskette on "Country Case Study Report" with sample data	MotherCare		T Fujisaki E Beracochea M P Sanchez D Donaldson M Thuo J Crook D Ross-Degnan J McFadyen	12 3 10 2 5 5 2 1		\$23,006
7	Organize Donor Round Table Discussion	Conference proceedings	MotherCare		E Beracochea M P Sanchez T Fujisaki D Donaldson J Crook D Ross-Degnan	3 3 10 3 10 3	Boston-DC (2) Boston-DC (2) Boston-DC (2) Boston-DC (2)	\$25,712
8	Organize the Electronic Conference	Conference Summary Report	FPMD MotherCare		E Beracochea M P Sanchez T Fujisaki J Crook D Ross-Degnan	3 4 13 10 5	DC-Boston (2)	\$20,837

REPRODUCTIVE HEALTH								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
9	Present CES at APHA and NCIH	•Conference paper •Presentation materials		E Beracochea T Fujisaki J Crook	3 5 5			\$6,817
10	Prepare and Disseminate CES Information Package	CES Information Package		E Beracochea T Fujisaki J Crook J McFadyen	2 10 5 2		Reproduction costs (\$5,500)	\$16,316
11	Write the Final Report	Project final report		E Beracochea T Fujisaki J McFadyen J Crook	5 15 1 5			\$14,493

## REPRODUCTIVE HEALTH

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Complete the Analysis of Kenya Field Test Data	SEL, PRO, DIS, RDU	OPR			X													
2 Organize and Conduct CES Workshop in Kenya	SEL, PRO, DIS, RDU	POL					X											
3 Complete Revisions of CES Spreadsheets	SEL, PRO, DIS, RDU	TDV				X												
4 Write CES Guide Vol I	SEL, PRO, DIS, RDU	TDV				X												
5 Write CES Guide Vol II	SEL, PRO, DIS, RDU	TDV					X											
6 Write CES Guide Vol III	SEL, PRO, DIS, RDU	TDV						X										
7 Organize Donor Round Table Discussion	SEL, PRO, DIS, RDU	DCC												X				
8 Organize Electronic Conference	SEL, PRO, DIS, RDU	INF									X							
9 Present CES at APHA and NCIH	SEL, PRO, DIS, RDU	INF						X								X		
10 Prepare and Disseminate CES Information Package	SEL, PRO, DIS, RDU	INF														X		
11 Write the Final Report	SEL, PRO, DIS, RDU	INF															X	

TECHNICAL LEADERSHIP								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Drug Registration Assessments and Possible Manual Revision	•Assessment report •Revised manual	WHO	T Savelli E Beracochea D Lee M Miralles J McFadyen J Rankin O Duzey M Gabra T Fujisaki D Keene D Callender T Moore A Zagorski A Utshudi S Parker	4 1 2 4 15 1 2 2 2 2 2 2 2 2 2 3	DC-Geneva (5)  DC-Geneva (10)		\$44,285
2	Global Inventory of Donor Activities in Drug Management	Report	WHO Danida SIDA CIDA Irish Aid World Bank JICA Nippon et al	T Savelli E Beracochea D Lee M Miralles J McFadyen J Rankin M Gabra R Burn S Parker	2 2 2 5 1 2 2 25 7			\$26,214

## TECHNICAL LEADERSHIP

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
3	One-Day Workshop on Pharmaco-economics	Workshop proceedings		T Savelli J Rankin M Miralles J McFadyen W Newbrander E Armstrong S Parker M Chomyszak	1 1 2 1 4 4 3 1	Boston-DC (1) Phoenix-DC (2)	Room and equipment, materials, workshop expenses	\$18,005
4	Technical Seminar Series Indicator-based Assessments, Integration of Vertical Programs, Managing Decentralization	Report	FPMD GHC	T Savelli E Beracochea M Miralles J McFadyen M Gabra R Burn D Keene O Duzey S Parker M Chomyszak	2 5 3 3 3 3 3 3 2 2		Room and equipment rental at National Press Club	\$22,046
5	Technical Review of Determinants of Antimicrobial Drugs Use and Interventions to Improve Antimicrobial Drug Use	Report	INRUD WHO/DAP	D Lee M Miralles S Parker Visiting Fellow	5 5 10	Accra-DC (1) Boston-DC (2)  Accra-DC (airfare only) DC-Boston (1)	Lawyer fees, visiting scientist grant	\$44,558

TECHNICAL LEADERSHIP

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
6	Primer on Issues Related to Pharmaceuticals, Vaccines, and Contraceptives	Primer	PATH	J Rankin T Savelli E Beracochea M Mualles A Utshudi PA TBD M Gabra R Burn O Duzey A Zagorski I Adams	1 2 3 1 13 2 2 2 1 1 5			\$20,212

## TECHNICAL LEADERSHIP

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Drug Registration Assessments and Possible Manual Revision	PAR	IND, TDV										X		
2 Global Inventory of Donor Activities in Drug Management	PRM	DCC					X							
3 One Day Workshop on Pharmacoeconomics	HRD	TRN							X					
4 Technical Seminar Series Indicator Based Assessments, Integration of Vertical Programs, Managing Decentralization	HDR	INF CSM			X			X	X					
5 Technical Review on Determinants of Antimicrobial Drug Use and Interventions to Improve Antimicrobial Drug Use	RDU	INF						X						
6 Primer on Issues Related to Pharmaceuticals Vaccines and Contraceptives		INF			X									

## TOOLS' DEVELOPMENT

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	ABC/VEN Analysis Software			J McFadyen T Savelli R Burn S Parker S Reed	4 2 4 1 10			\$12,500
2	Revise <i>Rapid Pharmaceutical Management Assessment An Indicator-Based Approach Manual</i>			R Burn T Savelli E Beracochea T Moore M Gabra D Keene J McFadyen A Zagorski O Duzey D Callender A Utshudi J Rankin M Miralles D Lee D Nelson T Fujisaki T Cullen D Ross-Degnan	15 2 2 2 2 2 4 2 2 2 2 3 4 3 2 2 5 3		Postage	\$51,081
3	Software Support	Possible INVEC-2 upgrades		J McFadyen S Parker S Reed	12 5 30		Postage, phone/fax	\$22,889

## TOOLS' DEVELOPMENT

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 ABC/VEN Analysis Software	SEL PRO MIS	TDV	X											
2 Revise Indicators Manual	MIS	IND, TDV					X							
3 Software Support	MIS	TDV												X

PROJECT CLOSE DOWN								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Project Close Down			T Savelli E Beracochea T Moore M Gabra D Keene J McFadyen A Zagorski O Duzey V Dias T Fujisaki D Nelson D Callender A Utshudi R Burn SPA TBD J Jones M Chomyszak C Vincent J Rankin D Lee M Miralles V Pinell T Cullen I Adams J Crook S Parker	18 18 9 9 4 15 9 9 3 9 3 3 9 9 6 20 15 15 10 3 3 3 15 15 15 5	Boston-DC (1) (6 trips)	Meetings	\$172,622

**PROJECT CLOSE DOWN**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Project Close Down	PRM													X

AFRICA BUREAU ACTIVITIES								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Participate in USAID Health Sector Assessment in Liberia			D Ofori-Adjei	16	Accra-Monrovia (16)		\$9,578
2	Participate in External Review of Medical Stores Department in Tanzania	World Bank Danida		V Dias S Parker	30 5	Colombo-Dar es Salaam (30)		\$35,499
3	Desktop Study of Drug Management Issues Associated with IMCI Implementation in Africa	UNICEF WHO/AFRO BASICS WHO/CHD		D Keene E Beracochea D Lee M Miralles T Savelli J McFadyen S Parker A Utshudi	2 2 1 2 2 2 5 20		Translation	\$26,657
4	Initial Adaptation and Translation of DMCI Manual for Use in Africa (based on desktop study)	BASICS		D Keene E Beracochea D Lee M Miralles T Savelli J McFadyen S Parker A Utshudi	5 1 1 1 1 1 2 10		Translation	\$26,388

## AFRICA BUREAU ACTIVITIES

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
5	Regional Workshop to Introduce Methodology and Tool	Workshop proceedings	UNICEF WHO/AFRO BASICS WHO/CHD		D Keene A Utshudi P Ickx M Miralles J McFadyen S Parker	15 15 7 1 1 3	DC-Dakar (18) DC-Dakar (18) Paris-Dakar (18)	Workshop expenses, translation	\$63,549
6	Application of DMCI	DMCI Report	UNICEF WHO/AFRO BASICS WHO/CHD		D Keene P Ickx M Gabra M Miralles S Parker	5 7 25 1 3	in country in country	Interpreting	\$29,993
7	Follow-up TA Visit by RPM	Trip report			M Gabra A Utshudi S Parker	15 15 3	DC-Dakar (18) DC-Dakar (18)	Interpreting	\$43,475
8	Follow up TA Visit (2) by RPM	Trip report			D Keene S Parker	15 3	DC-Dakar (18)	Interpreting	\$34,938
9	Present Findings at Drug Availability and IMCI Meeting	Report	UNICEF WHO/AFRO BASICS		D Keene M Gabra J McFadyen S Parker	10 10 2 2	DC-Harare (14) DC-Harare (14)		\$34,938

AFRICA BUREAU ACTIVITIES									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
10	Participate in World Bank Mission(s), TBD (Illustrative)	Final Report(s)	World Bank		D Keene M Gabra A Savelli E Beracochea J McFadyen M Miralles P Ickx S Parker D Ofori-Adjei	2 28 5 3 2 3 10 5 9	DC-Dakar (18) DC-Dakar (18)     Paris-Dakar (12)  Accra-Dakar (12)	Workshop expenses	\$113,148

## AFRICA BUREAU

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Participate in USAID Health Sector Assessment in Liberia (done)	PAR	IND	X											
2 Participate in External Review of Medical Stores Department in Tanzania	PAR, DIS	IND		X										
3 Desktop Study of Drug Management Issues of IMCI Implementation in Africa	SEL PRO RDU	IND			X									
4 Initial Adaptation/Translation of DMCI Manual for Use in Africa, Based on Desktop Study	SEL PRO RDU	IND				X								
5 Regional Workshop to Introduce Methodology and Tool	SEL PRO RDU	CBT					X							
6 Application of DMCI	SEL, PRO, RDU	IND					X							
7 Follow up TA Visit by RPM	SEL, PRO, RDU	IND							X					
8 Follow up TA Visit (2) by RPM	SEL, PRO, RDU	IND								X				
9 Present Field Test Findings at Drug Availability and IMCI Meeting	SEL, PRO, RDU	TDV									X			
10 Participate in World Bank Mission(s), TBD	SEL, PRO, RDU	INF											X	

AFRICA INFECTIOUS DISEASES ACTIVITIES									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
1	Desktop Study on Current Practices/Projects Related to Antibiotic Selection /Procurement/Use	Desktop report describing current status of one or more aspects of antibiotic use	Illustratively WHO World Bank CDC INRUD		A Savelli D Lee M Miralles J McFadyen S Parker P Lalvani	2 1 2 2 5 10		\$14,264	
2	RPM Participation in Design and Evaluation of Regional and Mission Specific Activities	Report with recommendations on areas for future research, assessment and interventions	Illustratively CDC WHO		A Savelli D Lee M Miralles A Utshudi J McFadyen S Parker	5 1 1 15 3 3	DC-Dakar (18)	\$27,292	
3	RPM Participation in Comprehensive Baseline Assessment Activity	Assessment report and recommendations	Illustratively CDC WHO		A Savelli D Lee M Miralles A Utshudi J McFadyen S Parker	3 1 4 15 5 10	DC-Dakar (18)	\$30,685	
4	RPM Participation in Policy Options Workshop Based on Assessment Findings	Workshop proceedings/ elaboration of technical intervention plans	Illustratively CDC WHO		A Savelli D Lee M Miralles A Utshudi J McFadyen S Parker	2 1 1 10 1 5	DC-Dakar (9)	Workshop expenses (including funding 10 participants)	\$23,283

**AFRICA INFECTIOUS  
DISEASES ACTIVITIES**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Desktop Study on Current Practices/Projects Related to Antibiotic Selection/Procurement/Use	SEL,PRO,RDU	DCC			X									
2 RPM Participation in Design and Evaluation of Regional and Mission Specific Activities	SEL,PRO RDU	IND					X							
3 RPM Participation in In Depth Baseline Assessment Activity	SEL PRO RDU	IND							X					
4 RPM Participation in Policy Options Workshop Based on Assessment Findings	PAR	POL									X			

ANTIMICROBIAL RESISTANCE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Home Office Technical Support			T Savelli E Beracochea D Lee S Parker	12 6 12 5			\$32,077
2	Hospital Antimicrobial Use Indicators	•Set of indicators •Manual on "How to Investigate Drug Use in Hospitals"	2 3 4	INRUD WHO/DAP USP  D Lee M Miralles V Pinell D Callender SPA TBD S Parker	25 19 38 27 34 32	DC-Africa (18) DC-Asia (18) DC-LA/C (18)		\$232,447
3	Training Modules for D&T Committees	•Discussion paper •Training modules	2 3 4	INRUD WHO/DAP USP  D Lee M Miralles V Pinell D Callender SPA TBD S Parker	38 30 50 62 40 43	DC-Africa (18) DC-Africa (18) DC-Africa (18) DC-Africa (18)		\$233,029
4	Intervention Research on Antimicrobial Use	Selected study reports	2 3 4	INRUD WHO/DAP ARCH  D Lee M Miralles D Callender S Parker Participant	52 14 10 20	DC-Africa (15) DC-Asia (17) DC-Asia (17)  (Intercontinental)		\$169,712
5	SOTA	Report	2 3 4	INRUD WHO/DAP USP  D Lee D Callender	10 6			\$14,651

**ANTIMICROBIAL  
RESISTANCE**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Home Office Technical Coordination	PRM	POL												X
2 Hospital Antimicrobial Use Indicators	RDU/DI	IND/OP						X						
3 Training Modules for D&T Committees	RDU/DI	TDV									X			
4 Intervention Research on AM Use	RDU/DI	OPR										X		
5 SOTA	RDU	POL											X	

BANGLADESH								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Home Office Management		3 2 1	T Savelli M Miralles E Beracochea D Lee A Utshudi T Cullen	4 2 1 1 27 8			\$22,795
2	Prepare Master List of MTP Modules	List of required modules		RPM Management Group D Nelson A Utshudi T Cullen	4 3 1	Quito-Dhaka (14)		\$15,878
3	Prepare MTP Modules for RDF-Related Activities	MTP modules on related RDF activities		RPM Management Group D Nelson A Utshudi T Cullen	4 3 2	(Already in country) (Already in country)	Meeting & MTP material production \$603	\$5,687
4	Prepare and Provide RDF-Related Forms/Manuals for Use by NGOs	Management materials (forms, manuals)		RPM Management Group D Nelson A Utshudi T Cullen M Miralles J McFadyen	4 2 2 2 2			\$7,095
5	Prepare Curriculum for RDF Meeting and MTP Training/Orientation	MTP Modules		RPM Management Group D Nelson A Utshudi T Cullen	4 2 1			\$4,547

BANGLADESH								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
6	Name Trainers & Schedule for RDF Meeting & MTP Orientation	RPM Management Group		D Nelson A Utshudi T Cullen	3 3 1			\$4,303
7	Schedule External Review of Rules/Procedures for RDF Launch/Operation	Trip report	RPM Management Group	D Nelson A Utshudi T Cullen	5 3 1	Quito-Dhaka (14)		\$16,006
8	Review MTP Field Test Results and Revise the Modules	Revised MTP modules	RPM Management Group	D Nelson A Utshudi	2 1			\$2,217
9	Review Field Test Results of Meeting Modules 2 & 3 and Revise Modules as Required for Training	Revised modules	RPM Management Group	D Nelson A Utshudi T Cullen M Miralles J McFadyen	3 3 2 2 1		Revise and print training materials \$1,200	\$7,962
10	Conduct MTP/RDF Orientation and Follow-Up on the Launch of RDF Activities	Trip report	RPM Management Group	D Nelson A Utshudi T Cullen	5 2 1	(Already in country)		\$5,578
11	Conduct Field Visits to Monitor RDF Activities	Trip report	RPM Management Group	A Utshudi T Cullen	3 1	(Already in country)		\$2,105

BANGLADESH										
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost		
12	Assess Progress/Impact of RDF Activities	Trip report		RPM Management Group		D Nelson A Utshudi T Cullen	10 3 1	Quito-Dhaka (12) (Already in country)	\$10,151	
13	Develop Drug List and Standard Treatment Guidelines (STGs) (MTP)	•Drug list •STGs		RPM Management Group		B Santoso A Utshudi T Cullen T Savelli	12 5 2 1	Jakarta-Dhaka (15)	\$13,634	
14	Obtain Baseline Information on RDU Practices	Trip report		RPM Management Group		B Santoso A Utshudi	1 3	DC-/Dhaka (14)	\$10,007	
15	Determine Training/Monitoring/Supervision Needs (MTP)			RPM Management Group		B Santoso A Utshudi T Cullen	1 3 1	(Already in country)	\$2,314	
16	Develop RDU MTP Materials	Training/monitoring/supervision materials		RPM Management Group		B Santoso A Utshudi J McFadyen T Cullen M Miralles	1 6 1 2 1		\$5,258	
17	Conduct RDU (TOT) Training & Assist with the Set Up of Monitoring & Supervision System	Trip report		RPM Management Group		B Santoso T Moore A Utshudi	4 6 4	Jakarta-Dhaka (24) DC-Dhaka (17) DC-Dhaka (17)	Rental of facility & printing of materials \$5,400	\$39,169

BANGLADESH								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
18	Revise MTP Modules and Schedule Follow-On Training with Trainers	Revised training materials	RPM Management Group	A Utshudi B Santoso T Moore	4 4 4	(Already in country) (Already in country) (Already in country)		\$6,494
19	Conduct First Follow-On RDU MTP Training with Trainers	•Training materials •Schedule	RPM Management Group	B Santoso A Utshudi T Moore	4 4 4	(Already in country) (Already in country) (Already in country)		\$8,365
20	Conduct Second Follow-On RDU MTP Training with Trainers	•Training materials •Schedule	RPM Management Group	B Santoso A Utshudi T Moore	4 2 2	(Already in country)		\$4,640
21	Follow-Up and Monitor RDU Activities with NGOs		RPM Management Group	A Utshudi T Cullen	10 2			\$6,241
22	Assess Progress & Impact of RDU Activities	Trip report	RPM Management Group	B Santoso T Savelli A Utshudi	1 1 10	DC-Dhaka (12)		\$14,581
23	Prepare Final Report and Close-Out	Final progress report	RPM Management Group	A Utshudi T Cullen	6 2			\$11,489

**BANGLADESH**

Description of Activity	Tech Area	Mode	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999			
			6/98	7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Home Office Management																		
2 Prepare Master List of MTP Modules	PRO FIN	DTA		X														
3 Prepare MTP Modules for RDF Related Activities	PRO FIN	DTA			X													
4 Prepare RDF Related Forms/Manuals for Use by NGOs	PRO FIN	TRN			X													
5 Prepare Curriculum for RDF Meeting and MTP Orientation	PRO FIN	TRN		X														
6 Name Trainers & Schedule for RDF Meeting and MTP Orientation	PRO FIN	TRN			X													
7 Schedule External Review of Rules /Procedures for RDF Launch/Operation	PRO FIN	IND					X											
8 Review MTP Field Tests Results & Revise Modules	PRO FIN	TRN				X												
9 Review Field Test Results of Modules 2 & 3 & Revise Modules for Training	PRO,FIN	TRN				X												
10 Conduct the MTP/RDF Orientation & Follow Up on the Launch of the RDF Activities by NGOs	PRO FIN	TRN					X											
11 Conduct Field Visits to Monitor RDF Activities	PRO FIN	TRN														X		
12 Assess Progress/Impact of RDF Activities	PRO FIN	IND														X		
13 Develop Drug List and Standard Treatment Guidelines	RDU	DTA	X															
14 Obtain Baseline Information on RDU Practices	RDU	IND				X												
15 Determine Training Monitoring Supervision Needs	RDU	TRN		X														
16 Develop Training Monitoring Supervision Materials (TOT)	RDU	TRN				X												
17 Conduct RDU Training (TOT) & Set Up Monitoring Supervision System	RDU	TRN				X												
18 Revise Modules & Schedule Follow On Training	RDU	TRN				X												
19 Conduct First Follow On RDU Training with Trainers	RDU	TRN				X												
20 Conduct Second Follow On RDU Training with Trainers	RDU	TRN				X												
21 Follow Up and Monitor RDU Activities with NGOs	RDU	TRN										X						
22 Assess Progress & Impact of RDU Activities	RDU	IND													X			
23 Prepare Final Report & Close Out	RDU	IND															X	

**Bangladesh Likely Needs at the End of Project**

Although most of the NGOs that are involved in the implementation of the National Integrated Population Health Program (NIPHP) have program development experience, attaining the NIPHP's objective to reduce fertility and improve family health by the NIPHP's completion date remains a serious challenge. In order to increase the chances of attaining the NIPHP's objective, it is recommended that the following issues be addressed in future health program development:

- International donors' (including USAID's) investments in the Bangladesh health sector should be balanced and broad spectrum assistance packages that include investment for improved drug management and rational use at the primary and secondary levels of the country's health care system.
- The current NIPHP should be expanded through the NGOs and should include grassroots community involvement in the planning and management of primary health care activities in order to increase coverage. The involvement of community action groups in certain health posts/health center activities (e.g. those that promote increased awareness about hygiene and rational use of drugs) are the building blocks for curative and preventive care, and for promoting health services.
- Community financing through user fees is an important resource that should be encouraged and expanded as a complement of the ongoing RDF and RDU activities. The Integrated Management of Childhood Illness (IMCI) activities should be reflected in the NIPHP's Essential Services Package (ESP).

ECUADOR								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Assist MOH in Implementing MTP Modules in 10 New Provinces	•MTP session minutes •MOH trip reports	MOH-DNAS FASBASE	B 1	J AVECILLAS H SILVA C PROAÑO	88 88 88		Local travel and per diem \$5000	

**ECUADOR**

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Assist MOH to Implement MTP Modules in 10 New Provinces	SEL, PRO DIS RDU	OPS		X														

### Ecuador Likely Needs at the End of Project

The close-out of RPM activities for Ecuador will take place in three phases

- Phase One Cessation of Field Activities - July 31, 1998  
This phase has been completed with expenditure of Mission field support funds. The MOH and World Bank project, FASBASE, are implementing the drug management modules in the remaining 11 provinces of the country. CEISAN is implementing the rational drug use public education program, URMES, in selected cities around the country.
- Phase Two Close-Out Conference (International RDU Congress) - October - November 1998  
The congress has been approved by USAID and PAHO and is being negotiated with the new government (Director of Sanitary Control still to be named).
- Phase Three Continuing Technical Assistance through September 1999 (contingent on Mission FY-99 field support). The USAID Mission has expressed its desire to continue support to RPM through September 1999. If field support funds become available, they will be devoted to the following activities:
  - ▶ Development of RDU modules. The MTP modules designed and implemented to-date have dealt mainly with logistical and financial management of drugs in primary care facilities, and with cost recovery. One module has been implemented on "good prescribing practices" but should be complemented with "good dispensing practices," "patient education," and "drug use investigation."
  - ▶ Support for institutionalization of URMES. The URMES program is undercapitalized. If field support funds become available, some of these monies will be devoted to printing URMES student workbooks.

RPM recommends the following to the Mission regarding activities needed after September 1999

- Drug management in hospitals and cost recovery. RPM began activities in this priority area in 1998 with the understanding that FASBASE would finance application in the 21 provincial hospitals. FASBASE did not follow through on the commitment. The hospital drug management modules have now been tested in Ecuador and implemented in Peru. They are available for implementation in Ecuador in the immediate future.

HONDURAS								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Assist USAID Honduras in RPM Activities	Report			R Burn D Nelson T Cullen	4 20 3	Quito-Tegucigalpa (28)		\$30,005

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# HONDURAS

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Assist USAID/Honduras	POL	TBD												x

**Honduras Likely Needs at the End of the Project**

Discussion with the Mission and local counterparts in Honduras will clarify drug management interests and needs. Once the work plan is approved, RPM can explore likely needs after end of project (EOP)

HUNGARY									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
1	Conduct the Analysis of GC Anti-Hypertensive Drug Database	Report of results	Green Cross		T Fujisaki T Cullen K Fedinecz	10 1 2		Subcontract with Green Cross (\$20,000)	\$32,129
2	Anti-Hypertensive Prescribing Survey of GC Member General Practitioners	Report of survey results	Green Cross		T Fujisaki T Cullen M Miralles E Armstrong K Fedinecz	25 5 3 5 5	Boston-Budapest (8)	Subcontract with Green Cross (\$23,820)	\$55,288
3	Survey on Current Hospital-Based Drug Management Activities	Report of survey results	Health Service Management Training Centre (HSMTC) of Semmelweis University		T Fujisaki T Savelli T Cullen E Armstrong	15 1 5 5		Subcontract with the Health Service Management Training Centre of Semmelweis Univ (\$5,373)	\$17,275
4	Close-Out Trip to Discuss Findings From Surveys and to Develop Recommendations for Future	Summary report with recommendations, copies of information and educational materials	Green Cross HSMTC Hungarian Hypertensive Society		T Fujisaki T Savelli T Cullen J McFadyen E Armstrong K Fedinecz	20 5 10 1 15 20	Boston-Budapest (16)    Tucson-Budapest (16)	Reproduction and shipping costs (\$14,000)	\$77,734

## HUNGARY

Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
5 Write Final Report	Final country report			T Fujisaki T Savelli M Miralles J McFadyen T Cullen	5 2 1 1 2	Boston-DC (1)		\$7,557

# HUNGARY

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Analysis of GC Anti Hypertensive Drug Database	RDU	DTA			X													
2 Anti Hypertensive Prescribing Survey of GC Member General Practitioners	RDU	DTA						X										
3 Survey on Current Hospital Based Drug Management Activities	RDU	OPR					X											
4 Close Out Trip to Discuss Findings from Surveys and Develop Recommendations for Future	RDU	INF									X							
5 Write Final Report													X					

### Hungary Likely Needs at the End of Project

The Hungary program will identify where prescribing problems exist in the treatment of hypertension by primary care doctors in private practice. It will produce a database of current hospital-based drug management activities. The project has also identified the issues in the current drug subsidy system, such as the inclusion of a few problematic drugs in terms of safety and efficacy, duplication of products in the list for same generic drugs and therapeutic classes, and lack of incentive for the prescribers to make cost-effective prescribing decisions.

RPM recommends that, should the Mission decide to continue support for pharmaceutical management activities, the following points be considered:

- It would be beneficial to hold a rational drug use workshop to share the RPM survey findings with the prescribers and to identify factors affecting their prescribing decisions. Adverse impacts of irrational drug use should be addressed both on the quality of medical care and the costs for patients and the system. In order to generate an incentive for private sector doctors to take part in such a workshop and to change their prescribing behaviors, it may be useful to include speakers who can present how the recent changes in the health care system and policy in Hungary may affect the clinical and financial environment in which Hungarian doctors practice in the future.
- The workshop should also provide the participating physicians with training opportunities in basic concepts and practical applications of clinical pharmacology. There are effective training tools and experts available, such as the training method based on the *WHO Guide to Good Prescribing* (1994). Ways to assess their own prescribing decisions should be a part of the training in order to increase the sustainability of behavioral changes achieved at the workshop. It would also be advisable to conduct a post-intervention survey to measure the impacts of interventions implemented.
- Based on the information from the survey, some hospitals can be identified as sites for field testing the RPM approach for the formulary system and the regular drug utilization reviews. These experiences will identify issues that are unique to Hungarian hospitals and the health care system in introducing the formulary system. It would also be beneficial to organize a workshop to share the experience in, and impacts of, introducing the formulary system at different hospitals with the rest of the Hungarian hospitals.
- The outcomes of the field test and the workshop can be used as the basis for developing manuals and other educational materials on the hospital-based drug management tools for Hungarian health care providers and institutions. Key stakeholders in the area, such as the Ministry of Health, pharmacy colleges and the associations of Hungarian hospitals and hospital pharmacists, should be invited to take part in this process. These materials may be used for formal as well as informal training of health care providers and managers in the future.
- Further analyses of the drug subsidy program, especially on the expenditure patterns of the drug subsidy funds per therapeutic group and per product using the information about the consumption level per product, will be highly useful in identifying areas on which reform efforts should be focused.

LATIN AMERICA/CARIBBEAN INFECTIOUS DISEASES ACTIVITIES									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
1	Intervention Research on Antimicrobial Use	Report	INRUD WHO/DAP PAHO IMSS/EHSR	2 3	M Miralles V Pinell S Parker	20 30 15	DC-Mexico (30) Chicago-Mexico (15)	8 participants \$35,000	\$90,221
2	LA/C Course on Promoting Rational Use of Antimicrobials	Workshop report	INRUD WHO/DAP PAHO IMSS/EHSR	2 3	D Lee M Miralles V Pinell S Parker	20 20 40 15	DC-Mexico (26) Chicago -Mexico (13)	10 participants \$40,000	\$109,627

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**LA/C INFECTIOUS  
DISEASES ACTIVITIES**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Intervention Research on AM Use	RDU	OPR												X
2 Promoting Rational Antimicrobial Drug Use Course	RDU	TRN												X

MOZAMBIQUE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1	Support for MSH/FPMD Office	Financial procedures manual		T Moore I Adams J Jones J Clark	25 25 10 30			\$44,102
2	Conduct CPS Training Course in Matola	•CPS manual •Implementation plan •Proceedings •Monitoring data	3 3	T Moore E Beracochea S Unewal I Adams J Clark	20 2 20 5 2	DC-Maputo (12)  (2)	Transportation and materials \$2,300	\$28,718
3	Conduct CPS Training Course in Gaza	•Implementation plan •Proceedings •Monitoring data	3 3	T Moore E Beracochea S Unewal J Clark	5 1 15 2	  (2)	Transportation and materials \$2,300	\$12,358
4	Conduct CPS Training Course in Niassa	•Implementation plan •Proceedings •Monitoring data	3 3	T Moore  S Unewal  J Nkunda I Adams J Clark	15  10  25 3 2	DC-Maputo (21) Maputo-Lichinga (7) Maputo-Lichinga (8)	Transportation and materials \$2,300	\$35,808
5	Conduct CPS Training Course in Inhambane	•Implementation plan •Proceedings •Monitoring data	3 3	S Unewal J Clark	15 2	(1)	Transportation and materials \$2,300	\$8,280

MOZAMBIQUE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
6	Conduct CPS Training Course in Zambesia	UNICEF Provincial MOH	3 3	T Moore	5	Maputo-Zambesia (5)	Transportation and materials \$2,300	\$20,032
				S Unewal	6			
				J Nkunda	30			
				I Santos	20			
				J Clark	2			
7	Conduct CPS Training Course in Nampula	Provincial MOH	3 3	T Moore	15	Maputo-Nampula (5)	Transportation and materials \$2,300	\$24,282
				S Unewal	10	Niassa-Nampula (3)		
				J Nkunda	25			
				J Clark	2			
8	Conduct CPS Training Course in Tete	Provincial MOH	3 3	T Moore	5	Maputo-Tete (5)	Transportation and materials \$2,300	\$18,527
				S Unewal	15	Niassa-Tete (5)		
				J Nkunda	25			
				J Clark	2			
9	Conduct CPS Training Course in Sofala	Provincial MOH	3 3	T Moore	15	Maputo-Sofala (4)	Transportation and materials \$2,300	\$25,431
				S Unewal	10	Zambesia-Sofala (4)		
				I Santos	25			
				J Clark	2			

MOZAMBIQUE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
10	Conduct CPS Training Course in Cabo Delgado	•Implementation plan •Proceedings •Monitoring data	Provincial MOH		T Moore 5 S Unewal 20 J Nkunda 30 I Santos 15 J Clark 2	Maputo-Pemba (4) Nampula-Pemba (4)	Transportation and materials \$2,300	\$24,197
11	Conduct CPS Training Course in Manica	•Implementation plan •Proceedings •Monitoring data •Assessment of impact of all trainings	Provincial MOH	3 3	T Moore 5 S Unewal 10 J Nkunda 30 I Santos 25 J Clark 2	Maputo-Manica (4) Zambesia-Manica (3)	Transportation and materials \$2,300	\$22,955
12	Hospital Cost Recovery Assessment	Report	Provincial MOH	3 3	T Moore 20 J Coburn 20 S Unewal 10 J Guevara 5 N Nkunda 30 I Adams 6 J Clark 2	DC-Maputo (17) DC-Maputo (17)		\$58 018
13	Recommend Hospital Cost Recovery Scheme	Report	Provincial MOH	3 3	T Moore 5 S Unewal 15 J Nkunda 10			\$10,270

MOZAMBIQUE									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
14	Implement Recommended Cost Recovery Scheme in One Hospital	•Report •Implementation Manual	Provincial MOH	3 3	T Moore S Unewal I Adams	20 15 10	DC-Maputo (17)	Materials \$600	\$28,247
15	Roll-Out Cost Recovery Scheme to One Other Site	•Report •Implementation Manual	Provincial MOH	3 3	T Moore S Unewal J Nkunda I Adams J Clark	15 10 20 3 2	DC-Maputo (17)		\$29,850
16	Rational Drug Use Studies	•Student proposals •Study reports •Final bound volume	Medical Institute (FAIACS)	3 1 3	T Moore E Beracochea M Miralles J McFadyen I Adams	15 2 3 2 3	DC-Maputo (17)	Computer and materials \$20,779	\$53,541
17	Adapt and Translate Interactive Pharmacy Training Modules	Audio and video modules in Portuguese	Health Institute in Maputo	3 1 3	T Moore S Unewal E Banqueiro	5 15 30		Computer and materials \$7,559	\$24,748
18	Incorporate Modules into Pharmacy Curriculum	Curriculum	Health Institute in Maputo	3 1 3	A Utshudi S Unewal	5 20		Materials \$1,575	\$10,470
19	Conduct RDU Course for Health Trainers	•Training materials •Proceedings	Health Institute in Maputo	3 1 3	A Utshudi S Unewal I Adams	20 5 3	DC-Maputo (14)	Materials \$892	\$25,802

MOZAMBIQUE									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
20	Student Internships in Health Care Facilities	•Student project reports •Conference proceedings	Health Institute in Maputo	3 1 3	T Moore S Unewal J Clark	10 10 2	(2) (3)	Materials \$4,200	\$16,480
21	Logistics Assessment	Interim report	MOH/Dept Pharmacy	3 3	T Moore J Guevara I Adams	5 20 3	Lima-Maputo (20)		\$23,242
22	Prepare Draft Manual	Draft manual	MOH/Dept Pharmacy	3 3	J Guevara	15	(15)		\$9,299
23	Revise with Input of MOH Staff	•Final report •Final manual	MOH/Dept Pharmacy	3 3	T Moore J Guevara I Adams	15 5 5	Lima-Maputo (5)		\$16,733
24	Complete Final Report	Report			S Unewal T Moore E Beracochea J McFadyen I Adams T Savelli J Nkunda I Santos J Clark	30 30 1 2 8 1 30 30 4	Maputo-DC (30)      (14)		\$65,673

## MOZAMBIQUE

Description of Activity	Tech Area	Mode	3rd Quarter 1998				4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			6/98	7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Support MSH/FPMD office			X															
2 Conduct CPS Training (Matola)	DIS, RDU	TRN					X											
3 Conduct CPS Training (Gaza)	DIS, RDU	TRN						X										
4 Conduct CPS Training (Niassa)	DIS, RDU	TRN					X											
5 Conduct CPS Training (Inhambane)	DIS, RDU	TRN						X										
6 Conduct CPS Training (Zambesia)	DIS, RDU	TRN										X						
7 Conduct CPS Training (Nampula)	DIS, RDU	TRN								X								
8 Conduct CPS Training (Tete)	DIS, RDU	TRN									X							
9 Conduct CPS Training (Sofala)	DIS, RDU	TRN												X				
10 Conduct CPS Training (Cabo Delgado)	DIS, RDU	TRN														X		
11 Conduct CPS Training (Manica)	DIS, RDU	TRN														X		
12 Hospital Cost Recovery Assessment	FIN	IND				X												
13 Recommend Cost Recovery Scheme	FIN	DTA						X										
14 Implement Recommended Cost Recovery Scheme	FIN	DTA								X								
15 Roll out Cost Recovery Scheme to One Other Site	FIN	DTA											X					
16 Rational Drug Use Studies	RDU	DFS						X										
17 Adapt and Translate Interactive	RDU	DTA									X							
18 Incorporate Modules Into Pharmacy Curriculum	RDU	DTA														X		
19 RDU Course for Health Trainers	RDU	TRN										X						
20 Student Internships in Health Care Facilities	RDU	DFS															X	
21 Logistics Assessment	RDU	DTA									X							
22 Prepare Draft Manual	RDU	DTA									X							
23 Revise with Input of MOH Staff	RDU	DTA									X							
24 Complete Final Report																		X

**Mozambique Likely Needs at the End of Project**

The focus of the Mozambique country program has been to train staff at all levels of the health care system in proper techniques of drug management and rational use. The program began with training of central level MOH staff in a two-week course involving didactic material and practical exercises. After training a core of local trainers and practitioners, the course was repeated in the northern, central and southern regions where provincial level pharmacy and medical staff participated. Once the provincial staff were capacitated, they began implementation of basic drug management and rational use techniques with district-level pharmacy and medical staff, as on-site practical training. It is expected that approximately 70% of MOH staff who handle pharmaceuticals will have been trained by the end of the project.

Technical assistance was provided to the Department of Pharmacy at the MOH in developing operational manuals for pharmacy and warehouse operations at the provincial level. Although there was need for technical assistance in other areas of the pharmaceutical sector, the Department of Pharmacy at the MOH was unable to organize itself in such a way that counterparts who would benefit from RPM expertise were available.

There are many likely needs at the end of the project in Mozambique, and RPM makes the following recommendations for future work in pharmaceuticals:

- Implementation of basic drug management and rational use training in the districts not reached by RPM, using the provincial staff previously capacitated by RPM
- Development of monitoring tools for capacity building of provincial pharmacy and medical staff in the area of supervision
- Training of central level staff on quantification of drugs and supplies needs at the national level
- Needs assessment for providing options on computerizing provincial warehouses in order to improve reporting of stock levels and consumption data to the central level
- Further training and technical assistance in modification of the essential drugs list and techniques for proper drug selection
- Technical assistance in the area of drug cost recovery and revolving drug funds for health institutions, conforming with health finance reform options selected by the MOH in 1999
- Technical assistance in developing operation manuals for pharmacies and warehouses at all levels of the health system
- Technical support for drug availability and use issues for the IMCI initiative

NEPAL								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Home Office Project Management				D Keene T Cullen	15 20		Office and computer equipment	\$52,054
2 Set Up Training Center at Department of Drug Administration (DDA)	•Operational training center •Project Management Manual		SO2	D Keene J Jones V Dias T Cullen	5 20 15 3	Already in country DC-Kathmandu (18) Colombo-Kathmandu (12)	MOU/FY98 \$15,643 MOU/FY99 \$11,876	\$73,777
3 Conduct Qualitative Study of Drug Management Systems at the District Level	Report "Review of District-Level Drug Management System"	Nepal Working Group*	SO2	D Keene V Dias B Santoso	5 20 10	DC-Kathmandu (14) Colombo-Kathmandu (18) Yogyakarta-Kathmandu(8)		\$39,241
4 Conduct District-Level Prescribing Baseline Study	OR Report	Nepal Working Group*	SO2	D Keene V Dias B Santoso T Cullen	10 20 10 3	Already in country Already in country Already in country	Subcontract to INRUD /Nepal \$11,500	\$41,030
5 Develop Manuals and Supervisory Training Materials for Improving District-Level Drug Management	Training manuals (quantification, storekeeping, prescribing, dispensing)	Nepal Working Group*	SO2	D Keene V Dias B Santoso T Cullen	10 20 10 10	DC-Kathmandu (14) Colombo-Kathmandu (18) Yogyakarta-Kathmandu (8)		\$47,662

NEPAL								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
6 Support Development of Consumer Drug Information Bulletins with Selected Topics on Rational Use of Antimicrobials	Consumer newsletters (English and Nepali)		SO2	D Keene V Dias B Santoso T Cullen	3 5 10 4	Already in country Already in country Already in country	Subcontract with RECPHEC \$12,000	\$35,656
7 Produce Revised Standard Treatment Guidelines for Health Posts and Sub-Health Posts	STGs (10,000 copies in English and Nepali)	Nepal Working Group*	SO2	D Keene V Dias B Santoso T Cullen	8 15 15 3	Already in country Already in country Yogyakarta-Kathmandu (10)		\$53,063
8 Support for Intervention Study to Assess Different Strategies to Implement STGs	OR Report		SO2	D Keene V Dias B Santoso T Cullen	3 5 7 4	Already in country Already in country Already in country		\$13 733
9 Conduct Study to Assess the Financial and Social Incentives that Motivate Drug Sellers in the Sale of Antimicrobials	OR Report	NCDA AIDSCAP USP	SO2	D Keene B Santoso  D Lee TBD T Cullen	15 15  3 30 5	DC-Kathmandu (14) Yogyakarta-Kathmandu (8)	Subcontract for data collection	\$88,741

NEPAL									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
10	Develop Procurement Reporting System to Assess Availability of Antimicrobials and Other Drugs	Pharmaceutical Supply Directory		SO2	D Keene V Dias T Cullen	15 40 3	Already in country Colombo-Kathmandu (21)	Subcontract to DDA study	\$85,235
11	Collaborate with ICDDR,B to Conduct Baseline Assessment of Current Laboratory Practices and Antimicrobial Susceptibility Information Management and Use	Baseline Assessment Report	ICDDR,B	SO2	D Keene D Lee B Santoso T Cullen	15 20 5 1	DC-Kathmandu (14) DC-Kathmandu (10) Already in country		\$52,076

NEPAL									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
12	Collaborate with ICDDR,B to Plan a National Consensus-Building Workshop to Develop National Standard Bacteriology Laboratory Operating Procedures and Policy Making for Appropriate Prescribing Practices	Workshop on AMR Surveillance	ICDDR,B	SO2	D Keene D Lee V Dias B Santoso T Savelli T Cullen	15 10 5 7 8 3	DC-Kathmandu (14) DC-Kathmandu (7) Already in country Already in country DC-Kathmandu (10)		\$60,944
13	Support Training to Strengthen the Capacity of Hospital Drug and Therapeutics Committee Members to Rationally use Antimicrobial Surveillance Data as Part of Treatment Decision-making Process	Asia regional workshop and course report	INRUD	SO2	D Keene T Cullen	3 3		Support two participants	\$18,142

NEPAL									
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost	
14	Coordinate the Establishment of a National Technical Advisory Committee to Analyze Reported Surveillance Data and Provide Policy Recommendations	ICDDR,B	SO2	D Keene D Lee SPA TBD T Cullen	15 2 3 3	DC-Kathmandu (10) Already in country		\$26,011	
15	Coordinate with EHP a Workshop for the Official Launch the Infectious Disease Program	Workshop and workshop proceedings	EHP	SO2	D Keene T Cullen	5 3		Subcontract to TRG for facilitator \$26,165	\$38,191
16	Complete Final Report	Report		SO2	D Keene T Savelli T Cullen	7 2 3			\$7,846
17	Participate in SAIDNET Conference				D Keene SPA TBD	15 10	DC-Dhaka (9) DC-Dhaka (9)	Support two Nepali participants	\$42,843

\* Nepal Working Group includes RPM, DDA, Logistics Management Division (LMD), JSI, GTZ, and INRUD/Nepal

# NEPAL

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Home Office Project Management																		
2 Set up Training Center at Department of Drug Administration (DDA)	PRM	DTA					X											
3 Conduct Qualitative Study of Drug Management Systems at the District Level	RDU	OPR			X													
4 Conduct District Level Prescribing Baseline Study	RDU	OPR									X							
5 Develop Manuals and Supervisory Training Materials for Improving District Level Drug Management	RDU	TRN											X					
6 Support Development of Consumer Drug Information Bulletins with Selected Topics on Rational Use of Antimicrobials	DIN RDU	INF		X														
7 Produce Revised Standard Treatment Guidelines for Health Posts and Sub Health Posts	DIN RDU	INF				X												
8 Support for Intervention Study to Assess Different Strategies to Implement STGs	RDU	OPR											X					
9 Conduct Study to Assess the Financial and Social Incentives that Motivate Drug Sellers in the Sale of Antimicrobials	RDU	OPR												X				
10 Develop Procurement Reporting System to Assess Availability of Antimicrobials and Other Drugs	PRO	INF						X										
11 Collaborate with ICDDR B to Conduct Baseline Assessment of Current Laboratory Practices and Antimicrobial Susceptibility Information Management and Use	DIN RDU	IND					X											
12 Collaborate with ICDDR B to Plan a National Consensus Building Workshop to Develop National Standard Bacteriology Laboratory Operating Procedures and Policy Making for Appropriate Prescribing Practices	DIN RDU	INF								X								
13 Support Training to Strengthen the Capacity of Hospital Drug and Therapeutics Committee Members to Rationally use Antimicrobial Surveillance Data as Part of Treatment Decision making Process	RDU	TRN													X			
14 Coordinate the Establishment of a National Technical Advisory Committee to Analyze Reported Surveillance Data and Provide Policy Recommendations	RDU	POL						X										
15 Coordinate with EHP a Workshop for the Official Launch the Infectious Disease Program	RDU	IND				X												
16 Complete Final Report	RDU	INF																X
17 Participate in SAIDNET Conference	RDU	TRN							X									

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### Nepal Likely Needs at the End of Project

As part of the close-out plan for Nepal, RPM will conduct a project review near the completion of RPM in September 1999. The review will be summarized in a final report to the USAID/Nepal mission. The report will address the status of each project activity and the progress made toward achieving rational drug availability and use objectives of the Infectious Disease Program.

To get feedback from a broad range of perspectives, interviews will be conducted with key collaborators on continued needs in the area of drug management that will extend beyond the end of the RPM project. This information will be used to develop recommendations for next steps. The final report will also address lessons learned in the context of achieving overall goals of the Infectious Disease Program.

Prior to the development of the Nepal Infectious Diseases Program in 1998, RPM's principal role was to address drug management issues in collaboration with JSI in support of the Logistics System Improvement Plan (LSIP) program. RPM's work in support of the Infectious Diseases Program has changed, and in some respects expanded, the focus of RPM activities. In addition, the objectives included in the Infectious Diseases Program are based on a five-year implementation plan. Therefore, it is anticipated that several of RPM's activities will require continued support after September 1999. For example, the following activities will likely require more work:

- There will be more work required to improve the antimicrobial and antiparasitic prescribing policy at hospitals based on the use of information, particularly antimicrobial resistance surveillance data. Activities at regional and district hospitals are just starting in 1998 and specific interventions will be recommended based in part on the findings of the AMR laboratory and rational drug use baseline assessment planned for December 1998. The types of interventions that may be recommended include drug formulary development, training in drug utilization review, and development of hospital-level standard treatment guidelines.
- One of the rational drug use activities targeting the hospital sector is training to strengthen the capacity of hospital drug and therapeutics (D&T) committees to rationally use AMR surveillance data as part of the treatment decision process. RPM is planning to support two participants to attend an Asia-region workshop for D&T committee members in 1998. Based on the feedback from participants and if the Asia-region workshop is offered annually, training additional hospital D&T committee members would be beneficial.
- The 1998 work plan activity to improve the private sector drug sellers' prescribing practices of antimicrobial and antiparasitic drugs marks the initial effort by RPM in Nepal to target the drug sellers. The planned activity is an operations research study to gather data on the motivating factors influencing drug selling behavior. The data from the research study will contribute to the development of a strategy and an intervention targeting drug sellers. By 1999, it is anticipated that the OR study will be completed and recommendations for an intervention will be developed, but a pilot test of an intervention will not be completed. One of the possible interventions could be to work with local counterparts to revise and update the training certificate program for drug sellers, or interventions similar to the STI AIDSCAP initiative.

- RPM has been working with DDA to increase their capacity to conduct training at the central and district levels. Three training sessions (one at the central level and two at the district level) will be completed by September 1999. Baseline drug management data have been collected in four districts, two control and two intervention districts. The impact of the training will be assessed by measuring any differences between the intervention and control districts. Based on the findings there may be a need to continue public sector support for improving drug management practices such as in the areas of procurement, quantification techniques, and drug supply management, and training to correct specific inappropriate antimicrobial prescribing practices.
- By the end of September 1999, it is anticipated that the AMR surveillance network will have been fully operational for less than a year. An important complement to the surveillance network will be the National AMR Technical Advisory Committee. The advisory committee will be charged with analyzing the reported surveillance data to provide policy recommendations. As a newly formed committee, it is anticipated that there will be a need for ongoing logistic and technical support to ensure the committee achieves its intended purpose.

PERU								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Assist MMR to Design MTP Modules	1 module designed and tested	Movimiento Manuela Ramos	3 3	S Pico Y Grijalva	15 10	Quito-Lima (15)		\$10,491
2 Assist MMR to Establish Drug Distribution to CBOs	System designed	Movimiento Manuela Ramos	3 3	D Nelson	10	Quito-Lima (10)		\$8,240
3 Evaluate Drug Availability and Use	Evaluation report	Movimiento Manuela Ramos	3 3	Y Grijalva D Nelson	10 10	Quito-Lima (5) Quito-Lima (5)		\$20,261
4 Close-Out and Lessons Learned with MMR	Final report	Movimiento Manuela Ramos	3 3	D Nelson	5	Quito-Lima (5)		\$8,011
5 8 MTP Sessions for Drug Management Modules	Session minutes	DIGEMID Project 2000	3 4	Y Grijalva M Vargas	20 20	Quito-Lima (15)		\$23,289
6 Supervise and Monitor Module Application	Trip reports	DIGEMID, Project 2000	3 4	M Vargas	60			\$29,229
7 Evaluate and Accredite Services	Hospital Certifications	Consortio ESAN	3 4	D Nelson Y Grijalva	10 10	Quito-Lima (5) Quito-Lima (5)		\$20,261
8 Close-Out and Lessons Learned with Project 2000	Final report	DIGEMID Project 2000	3 4	D Nelson	5	Quito-Lima (5)		\$8,418

PERU

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Assist MMR to Design MTP Modules	RDU,HRD	OPS		X														
2 Implement MTP Modules in CBOs	RDU,HRD	OPS													X			
3 Evaluate Drug Availability and Use	PRM	OPS			X					X								
4 Close Out and Lessons Learned with MMR	PRM	OPS										X						
5 Implement 8 MTP Drug Mgt Modules	SEL, PRO, DIS, RDU	OPS								X								
6 Supervise and Monitor MTP	SEL, PRO DIS RDU	OPS								X								
7 Evaluate and Accredite Services	SEL PRO, DIS, RDU	OPS									X							
8 Close Out and Lessons Learned with Project 2000	SEL, PRO, DIS, RDU	OPS										X	X					

### Peru Likely Needs at the End of Project

The close-out of RPM activities for Peru will take place in three phases

- Phase One Completion of Hospital Drug Management (HDM) modules with Project 2000 and DIGEMID - December 1998  
The six modules will be implemented in the 20 Project 2000 hospitals by December 1998, culminating with the module on Evaluation and Certification which will provide "monitoring" inputs for the national drug information system
- Phase Two Completion of Assistance to ReproSalud Project - March 1999  
RPM has been assisting ReproSalud to design the distribution of USAID-donated drugs and to implement drug use and health MTP modules within community-based women's organizations This activity should be completed by March 1999
- Phase Three Continuing Technical Assistance (contingent on Mission FY-99 field support)
  - ▶ Close-Out conference (International RDU Congress) - March 1999 An international RDU Congress is tentatively planned to report on results of implementation of the HDM modules and the National Drug Formulary
  - ▶ Certification of hospitals achieving quality drug management - March-April 1999 In conjunction with Project 2000, RPM will assist in the certification of hospitals demonstrating quality pharmacologic and therapeutic services This will bring to a close the HDM activity for Project 2000 hospitals with USAID field support funds
  - ▶ National drug information system, including IPSS - May 1999

RPM recommends the following to the Mission regarding activities needed after September 1999

- Assistance to expand HDM to whole country Assuming successful implementation of the HDM modules, it is likely that DIGEMID will request support to expand the HDM to the rest of Peru
- Development of RDU modules The MTP modules designed and implemented to-date have dealt mainly with logistical management of drugs in hospitals and implementation of the National Drug Formulary One module has been implemented on "good prescribing practices" but should be complemented with modules on "good dispensing practices" and "patient education "
- Implementation of URMES Several institutions, including the USAID Mission, have expressed interest in the rational drug use public education program, URMES Implementation will require identification of a national implementing institution, promotion among potential local sponsoring organizations, and printing of student workbooks, teacher and collaborator guides

POLIO ERADICATION INITIATIVE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
A Home Office Management				V Pinell	3	Chicago-DC (3)		\$3,205
B Participate in EPI Review of Mozambique	<ul style="list-style-type: none"> <li>• Adapted methodology</li> <li>• Assessment report</li> </ul>	BASICS UNICEF WHO MOH	3	V Pinell	20	Chicago-Maputo (18)		\$25,663
1 Adapt the EPI Review Methodology				S Chunilal	10			
2 Carry-Out Data Collection				S Parker	2			
3 Coordinate Analysis and Report Writing				E Beracochea	2			
				T Moore	1			
				M Gabra	1			
				J McFadyen	1			
C Disseminate Findings	<ul style="list-style-type: none"> <li>• Findings and recommendation report</li> <li>• Proceedings</li> <li>• 5-Year EPI plan</li> </ul>	BASICS UNICEF WHO MOH	3	V Pinell	21	Chicago-Maputo (18)		\$24,571
1 Present Findings of the EPI Review Related to Supply Management at the EPI 5-Year Training Workshop				E Beracochea	2			
				S Chunilal	5			
				T Moore	1			
				M Gabra	1			
				J McFadyen	1			
2 Prepare Strategies to Strengthen Areas Identified in the EPI Review				S Parker	2			

POLIO ERADICATION INITIATIVE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
D	Develop a Concept Paper on the Impact of Decentralization on EPI Planning and Implementation	BASICS UNICEF WHO	3	V Pinell	8	Chicago-Boston (2) Chicago-DC (3)		\$13,449
1	Prepare a Concept Paper Based on Areas Identified in the EPI Review			E Beracochea	1			
2	Develop Strategies to Address These Based on Literature and RPM Experience			S Chumlai	3			
3	Disseminate Findings			M Gabra	1			
				T Moore	1			
				S Parker	1			

**POLIO ERADICATION  
INITIATIVE**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
<b>A Home Office Management</b>														X
<b>B Participate in the EPI Review of Mozambique</b>	RDU/PRM	DCC			X									
1 Adapt the EPI Review Methodology		OPR, TDV												
2 Carry out Data Collection		IND												
3 Coordinate Analysis and Report Writing		IND, OPR												
<b>C Disseminate Findings</b>	MIS/HRD/PRM	INF					X							
1 Present Findings of the EPI Review Related to Supply Management at the January 17-25, 1999 EPI 5-year Planning Workshop		TRN, POL												
2 Prepare Strategies to Strengthen Areas Identified in the EPI Review		IND, OPR												
<b>D Develop a Concept Paper on the Impact of Decentralization on EPI Planning and Implementation</b>	PAR/RDU	OPR						X						
1 Prepare a Concept Paper Based on Areas Identified in the EPI Review		OPS												
2 Develop Strategies to Address These Based on Literature and RPM Experience		OPS												
3 Disseminate Findings		INF												

REDSO/ESA REGIONAL LOGISTICS INITIATIVE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 RPM RLI Task Force Coordination	Final report "Lessons Learned in Africa"	JSI REDSO APHIA Project		M Gabra J Crook J Jones E Beracochea T Savelli M Thuo	19 37 1 2 1 60			\$53,531
2 Prepare Review of the Situation of STD Drugs in Africa	Report	REDSO		M Gabra J McFadyen T Fujisaki P Lalvani	5 1 2 23	New York-DC (2)		\$23,022
3 Coordinate Trip to Nairobi for Regional Reproductive Health Commodities Workshop	Report	RLI Task Force		M Gabra 1 Candidate 1 Candidate 1 Candidate	3	Lusaka-Nairobi (6) Dar-Nairobi (6) Kampala-Nairobi (6)		\$13,266
4 Finalize Country and Regional Task Force Work Plans	Work Plans	JSI RLI Task Force		M Gabra E Beracochea	15 1	DC-Nairobi (14)		\$24,224
5 Conduct RDU Workshop in Tanzania	Workshop materials and proceedings	WHO INRUD RLI Task Force		M Thuo M Gabra D Lee	10 10 4	Nairobi-Dar (6) DC-Dar (6) DC-Dar (6)	Fees and materials (\$10,000)	\$75,894

REDSO/ESA REGIONAL LOGISTICS INITIATIVE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
6 Conduct Procurement Workshop in Zambia	Workshop materials and proceedings, including Regional Procurement Strategy	DMP JSI PATH RLI Task Force		M Gabra M Thuo 20 Participants	4 14	Nairobi-Lusaka (16) (75 for all)*	Fees and materials (\$10,000)	\$35,187

\*Note that some conference participants' travel and per diem will be funded directly by the missions and/or other organizations

**REDSO/ESA**

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 RPM RLI Task Force Coordination	PRM	POL																X
2 Prepare Review of STD Drugs in Africa	SEL, PRO	IND			X						X							
3 Coordinate Trip to Nairobi for Regional Reproductive Health Commodities Workshop	POL FIN SEL RDU	POL INF		X														
4 Finalize Country and Regional Task Force Work Plans	PRM	POL			X													
5 Conduct RDU Workshop in Tanzania	RDU	TRN					X											
6 Conduct Procurement Workshop in Zambia	PRO	TRN									X							

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**REDSO Likely Needs at the End of Project**

- Develop a strategy for the RLI to support the regional network members and include other countries in the future
- Develop and implement a cross-national collaborative research agenda on issues such as procurement, drug financing policy, drug cost-sharing and drug cost recovery schemes, drug management issues in regard to TB, malaria, IMCI, and reproductive health, and propose and implement focused interventions. These interventions would be aimed at improving the availability of the supplies essential to control and treat these health problems
- Disseminate better practices and experience with the integration of vertical supply management systems and the strengthening of decentralized supply systems
- Compare the efficiency of different drug needs quantification methods used in the region
- Support the development of a regional information network that would allow country members to access information regarding drug quality problems, prices, etc
- Identify regional drug financing mechanisms and compare their efficiency and sustainability
- Disseminate RPM experience in Africa: hospital formularies, URMES, the school-based drug use and information program in Zambia, MTP in Mozambique, reproductive health in Kenya, INRUD reports, etc
- Promote rational prescribing and dispensing practices in the private pharmaceutical sector: health services, community pharmacies, and other drug outlets

ZAMBIA								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 General Program Management and Coordination	<ul style="list-style-type: none"> <li>•Quarterly reports</li> <li>•Donor coordination</li> <li>•Final country report</li> </ul>	CBOH WHO/DAP TDRC IHCAR NAPHRA World Bank		T Savelli M Gabra J Crook J McFadyen E Beracochea R Andala J Jones	4 40 40 8 8 248 3	DC-Lusaka (16)		\$92,254
2 DILSAT Roll-Out in Six Districts	<ul style="list-style-type: none"> <li>•National roll-out plan</li> <li>•Training report</li> <li>•Problem-solving manual</li> </ul>	CBOH FPLM Irish Aid BASICS		M Gabra  R Andala District Staff	10  30	DC-Lusaka (18) DC-Lusaka (18) (30) (75)		\$20,600
3 Integration of Logistics at EDMSS	<ul style="list-style-type: none"> <li>•Integration report (including INVEC-2)</li> <li>•Manual of integrated logistics procedures</li> <li>•Manual of integrated procurement procedures</li> <li>•Guidelines for revolving drug funds and DSF account</li> </ul>	CBOH EDMSS		M Gabra J McFadyen P Fulilwa O Hazemba	10 15	Already in country DC-Lusaka (18) (6) (6)		\$27,806

ZAMBIA								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
4 Coordinate RDU Studies	•Students' proposals •Study reports	Evelyn Hone College		M Gabra M Miralles J McFadyen D Lee	5 2 2 2			\$13,658
5 Test URMES Modules in Schools	Adapted URMES modules	Zambia Pharmaceutical Society		M Gabra I Grijalva D Nelson	8 15 2	Already in country Quito-Lusaka (18)		\$28,265
6 Conduct PRDU Course for Health Trainers, Complete EDL and NDF	•PRDU course and report •EDL and NDF	CBOH SIDA	3 1 3	M Gabra D Lee D Ofori-Adjei M Auton J Crook	10 15 10 15 10	DC-Lusaka (18) DC-Lusaka (18) Accra-Lusaka (18) Copenhagen-Lusaka (18)		\$66,578
7 Send Candidates to TDRS Proposal Course and Other Courses	Reports and proposals	TDRS INRUD		M Gabra D Lee 1 Candidate 1 Candidate 1 Candidate 1 Candidate	2 1	Lusaka-Kampala (18) Lusaka-S Africa (18) Lusaka-S Africa (18) Lusaka-Amsterdam (18)		\$29,044

# ZAMBIA

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 General Program Management and Coordination	PRM	POL																X
2 DILSAT Roll Out	MIS	IND										X						
3 Integration of Logistics at EDMSS	POL, PRO, DIS, MIS	DTA																X
4 Coordinate RDU Studies	RDU	OPR							X									
5 Test URMES in Schools	RDU	TRN										X						
6 PRDU Course for Health Trainers, Complete EDL and NDF	RDU	TRN				X												
7 Send Candidates to TDRC Proposal Course and Other Courses	RDU	OPR				X												

**Zambia Likely Needs at the End of Project**

- Roll out of DILSAT and decentralized MTP (monitoring-training-planning) to the rest of the districts
- Complete implementation of the Integrated Supply Management System in support of the Integrated Essential Health Care Package
- Support installation of INVEC-2 at EDMSS
- Disseminate URMES, the school-based drug use and information program
- Institutionalize training and supervision capacity at CBOH e.g., rational drug use, quantification and stores management procedures, etc
- Develop and implement a procurement procedures manual
- Develop and implement a drug financing policy
- Develop and implement drug cost-sharing and drug cost-recovery schemes
- Identify drug management issues in regard to TB, malaria, IMCI, and reproductive health and propose and implement focused interventions. These interventions would be aimed at improving the availability of the supplies essential to control and treat these health problems
- Assist in developing the Hospital Drug Management Accreditation criteria and assist the Hospital Accreditation Program
- Promote rational prescribing and dispensing practices in the private pharmaceutical sector health services, community pharmacies, and other drug outlets

UKRAINE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Identify Priority Inpatient and Outpatient Diseases for Development of STGs	List of diseases			O Duzey	7			\$5,422
2 Assess Current Prescribing Practices for Identified Diseases	Assessment report			O Duzey M Chomyszak I Adams	24 21 5	DC-Kyiv (18) DC-Kyiv (18)		\$48,983
3 Analyze Prescribing Data and Revise Existing STGs	Draft STGs			D Callender E Armstrong O Duzey M Chomyszak Local specialist TBD I Adams	2 9 12 14 10 10	Tucson-Kyiv (15) in-country	Local specialist honorarium, interpreter	\$50,576
4 Finalize and Approve Revised STGs	Final STGs			O Duzey E Armstrong Local specialist TBD	3 5 5	in-country in-country in-country	Interpreter, local specialist honorarium	\$8,011
5 STG Implementation Workshop	Workshop materials and proceedings			A Zagorski E Armstrong Local specialist TBD I Adams	12 9 6 4	DC-Kyiv (10) Tucson-Kyiv (16)	Workshop expenses, interpreter, speaker honoraria	\$43,529
6 Finalize Formulary Policies and Procedures for Two Pilot Hospitals	Written policies and procedures			A Savelli I Adams	1 3			\$4 583

UKRAINE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
7 Conduct Training Needs Assessment in Pilot Sites	Assessment report	PHC Partnership Project		O Duzey I Adams	17 3	DC-Kyiv (18)	Data collectors	\$26,268
8 Develop Training Materials	Final Ukrainian language materials	PHC Partnership Project		O Duzey A Savelli I Adams M Miralles J McFadyen	10 1 5 2 1		Reproduction costs, translation	\$16,178
9 Drug Management Workshop (site 1)	Course materials and proceedings	PHC Partnership Project		O Duzey A Zagorski C Olson I Adams	14 10 12 3	DC-Kyiv (18) DC-Kyiv (18) San Diego-Kyiv (18)	Workshop expenses, interpreter, speaker honoraria	\$72,664
10 Follow-On TA Visit (Site 1)	Trip report	PHC Partnership Project		O Duzey A Zagorski C Olson	7 7 7	in-country in-country in-country		\$16,101
11 Drug Management workshop (site 2)	Course materials and proceedings	PHC Partnership Project		O Duzey A Zagorski Local consultant I Adams	12 12 10 3	DC-Kyiv (18) DC-Kyiv (18) DC-Kyiv (18) Local per diem (10)	Participant materials, interpreter, speaker honoraria	\$42,283
12 Follow-On TA (site 2)	Trip report	PHC Partnership Project		O Duzey A Zagorski	8 8	in-country in-country in-country	Interpreter	\$12,164

UKRAINE								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
13 Final Report Completed	Final report			O Duzey A Savelli M Miralles I Adams J McFadyen	5 1 1 3 2			\$7,112

**UKRAINE**

Description of Activity	Tech Area	Mode	6/98	3rd Quarter 1998			4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				7/98	8/98	9/98	10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Identify Priority Inpatient and Outpatient Diseases for Development of STGs	RDU	DTA		X														
2 Assess Current Prescribing Practices for Identified Diseases	RDU	IND			X													
3 Analyze Data and Revise STGs	RDU	DTA					X											
4 Finalize and Approve Revised STGs	RDU	DTA						X										
5 STG Implementation Workshop	RDU	TRN								X								
6 Finalize Formulary Policies and Procedures in Two Pilot Hospitals	SEL	DTA				X												
7 Training Needs Assessment in Pilot Sites	HRD	TRN					X											
8 Develop Training Materials	HRD	TRN								X								
9 Drug Management Workshop (site 1)	HRD	TRN									X							
10 Follow on TA (site 1)	HRD	DTA									X							
11 Drug Management Workshop (site 2)	HRD	TRN											X					
12 Follow on TA (site 2)	HRD	DTA											X					
13 Final Report Completed																	X	

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### Ukraine Likely Needs at the End of Project

It is anticipated that by the end of the RPM Project, Zhytomyr counterparts will have become proficient in rational drug selection and use methods, and serve as trainers for their medical colleagues. The primary health care sites will have gained knowledge and experience in several areas of drug management.

If USAID/Kyiv decides to continue supporting drug management activities in Ukraine, the following are suggested as logical next steps after the RPM Project ends:

- Roll out to other identified sites. As the Primary Health Care Initiative expands its scope, RPM-developed materials and training can be cost-effectively disseminated to a wide audience.
- Development of a Primary Health Care Drug Management Handbook. As the pilot sites gain experience, the development or adaptation of practical tools for use by managers in newly identified roll out sites would enhance consistency in their operation. This may become more important as Ukraine moves toward a social medical insurance model.
- Training to meet local public health needs, including infectious diseases (tuberculosis, HIV, antimicrobial resistance), and chronic health conditions (asthma, diabetes, hypertension). Such efforts might include cooperative activities with the Ministry of Health, local medical universities, public health departments, or other donor-related activities.
- Training in additional areas of effective drug management. For example, if initial efforts are directed at managerial skills needed for basic drug management operations (e.g., inventory management, procurement, dispensing, pricing) at the primary health care sites, follow-on training may focus on the clinical skills needed by physicians and pharmacists for cost-effective drug selection and rational prescribing, or the financial management skills necessary for effective participation in government or private insurance programs.
- Pharmacoeconomic analysis of treatment approaches in selected primary health care sites and comparison with other traditional models. Effective primary health care presumes that rational use of resources at primary level will reduce unnecessary expenditures at secondary and tertiary levels. Whereas cost-containment focuses solely on per unit costs of drug products and medical services, pharmacoeconomics takes into account all costs associated with the use (or omission) of identified products or treatment regimens. Such an analysis could demonstrate how rational prescribing at the primary health care level may reduce overall health care expenditures.
- Assessment of the effectiveness of instituted drug management policies and procedures. Once new management procedures are instituted, it would be beneficial to monitor progress and evaluate their effectiveness for further informed decision-making.
- A Follow-up assessment to evaluate the potential and actual impact of systematic use of STGs in Zhytomyr Oblast, and PHC sites would be useful.

CENTRAL ASIAN REPUBLICS								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Reconnaissance Visit to Almaty	Trip report			A Savelli	12	DC-Almaty (8)	Interpreter	\$20,304
2 Regional General Procurement Workshop for 30-40 Participants	Workshop Proceedings	PATH, WHO/EURO CDC		A Zagorski A Savelli M Miralles S Parker T Green	21 2 2 4 9	DC-Almaty (6)    Santa Fe-Almaty (6)	Interpreter, translation, workshop expenses, travel & per diem for other republics	\$78,478
3 Procurement Workshop in Kazakstan for 10-15 participants	Workshop Proceedings			A Zagorski A Savelli M Miralles S Parker T Green	9 2 2 4 9	DC-Almaty (6)    Santa Fe-Almaty (6)	Interpreter, translation, workshop expenses	\$40,047
4 Technical Assistance in Procurement in Kazakstan	Trip Report			A Zagorski T Green S Parker	18 16 3	DC-Almaty (16) Santa Fe-Almaty (16)	Interpreter	\$44,933
5 Final Report Completed	Report			A Zagorski A Savelli J McFadyen M Miralles S Parker	3 2 2 1 4			\$6,127

**CENTRAL ASIAN  
REPUBLICS**

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Reconnaissance Visit to Almaty	PRO	IND	X											
2 Regional General Procurement Workshop for 30 40 Participants	PRO PAR	TRN			X									
3 Procurement Workshop in Kazakstan for 10 15 Participants	PRO, HRD	TRN					X							
4 Technical Assistance in Procurement in Kazakstan	PRO, HRD	DTA						X						
5 Final Report Completed	PRO	INF										X		

*Pa*

**Central Asian Republics Likely Needs at the End of the Project**

The reconnaissance visit in the fall of 1998 to the Central Asian Republics (CAR) will clarify Mission and local counterpart interests and needs. Once the work plan is approved, RPM can explore likely needs after end of project (EOP). In the CAR, where procurement training and technical assistance are anticipated, likely needs after EOP might include continued support for transparent procurement mechanisms, an evaluation of the effectiveness of implemented procurement activities in providing a steady supply of low-cost, effective antibiotics for the treatment of tuberculosis, or an assessment of the effectiveness of current tuberculosis treatment protocols.

MOLDOVA								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Reconnaissance Visit to Kishinev	Trip Report			A Savelli J Crook	12 2	DC-Kishinev (8)	Interpreter	\$18,445
2 Formulary Systems Policy Options Workshop	Workshop Proceedings			D Callender A Zagorski E Armstrong J Crook	12 14 9 4	DC-Kishinev (7) DC-Kishinev (7) Tucson-Kishinev (7)	Interpreter, translation	\$53,050
3 Formulary Systems Implementation Workshop	Workshop Proceedings			D Callender A Zagorski E Armstrong J Crook	14 14 12 5	DC-Kishinev (9) DC-Kishinev (9) Tucson-Kishinev (9)	Interpreter	\$63,613
4 Technical Assistance in Formulary Systems Implementation	Report			D Callender J Crook	18 4	DC-Kishinev (16)	Interpreter	\$24,816
5 Final Report Completed	Report			D Callender A Savelli J McFadyen M Miralles J Crook	3 1 2 1 3			\$5,793

# MOLDOVA

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Reconnaissance Visit to Kishinev	SEL, RDU	IND		X										
2 Formulary Systems Policy Options Workshop	SEL, RDU, PAR	POL				X								
3 Formulary Systems Implementation Workshop	SEL, RDU	TRN						X						
4 Technical Assistance in Formulary Systems Implementation	SEL, RDU, HRD	DTA								X				
5 Final Report Completed	SEL, RDU	INF										X		

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**Moldova Likely Needs at the End of the Project**

The reconnaissance visit in the fall of 1998 to Moldova will clarify Mission and local counterpart interests and needs. Once the work plan is approved, RPM can explore likely needs after end of project (EOP). Further activities might include additional technical assistance in implementation of a national or regional formulary system, development and implementation of a drug use review (DUR) system, or assistance in drug procurement activities.

NIS, TBD								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 NIS Activities, TBD				A Zagorski A Savelli O Duzey I Adams	64 4 14 21			\$52,401

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NIS, TBD

Description of Activity	Tech Area	Mode	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
			10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 NIS Activities, TBD											X			

**NIS Likely Needs at the End of the Project**

Discussion with Missions and local counterparts in the NIS will clarify drug management interests and needs  
Once the work plan is approved, RPM can explore likely needs after end of project (EOP)

RUSSIA								
Activity	Outputs	Collaborators	S O	Staff	LOE Days	Travel (Per Diem Days)	Additional Expenses	Total Cost
1 Financial Support for National Formulary Conference		Pharmedinfo						\$6,454
2 Final Project Report Completed	Final Report			A Zagorksi A Savelli M Miralles J McFadyen O Duzey S Parker	10 3 2 2 4 5			\$15,275

**RUSSIA**

Description of Activity	Tech Area	Mode	6/98	4th Quarter 1998			1st Quarter 1999			2nd Quarter 1999			3rd Quarter 1999		
				10/98	11/98	12/98	1/99	2/99	3/99	4/99	5/99	6/99	7/99	8/99	9/99
1 Support for National Formulary Conference	SEL	DFS		X											
2 Final Project Report Completed	PRM	INF				X									

### Russia Likely Needs at the End of Project

Given the great interest of Russian counterparts at the Ministry of Health in the RPM Project, RPM recommends to the Mission that the following activities are worthy of consideration for future support

- Pending the results of the TB assessment, additional work is probably warranted in procurement and use of drugs for TB patients
- Given a new focus in Russia on formulary system development at the federal level, assistance could be provided to the Russian Federation Ministry of Health and other Ministries in this area
- The concept of Drug Utilization Review (DUR) was introduced to Russian health professionals during the course of RPM implementation. The program was received with great interest but was not fully implemented. Additional work could be done in this area.
- Adverse drug reaction monitoring and reporting is another critical component of formulary systems. The topic was embraced enthusiastically, but not implemented.
- USP, MSH, and local counterparts collaborated to integrate formulary development activities into some of the Drug Information Centers in oblasts launched under the USP part of the project (Ryazan and Novgorod Drug Information Centers). With the establishment of All Russia Drug Information Network (ARDIN) this integration could be rolled out to other Russian regions.
- With the establishment of formulary systems in Ryazan, Novgorod, and Pskov, RPM had hoped to assist those regions in developing mechanisms for pooled, competitive procurement of drugs for public health needs. This was to be in accord with requirements of the Russian Government and the President, outlined in the Russian Government Enactment #197/2731 of December 31, 1997, "On Training Specialists in Organization and Conducting Competitive Procurement of Goods for the Government Needs," and the Presidential Decree of April 8, 1997, "On the Immediate Measures of Corruption Prevention and Reduction of Budgetary Expenditures for Public Procurement."
- During the course of implementation in Russia, RPM built up a strong team of local experts and collaborating institutions trained in the principles of rational drug management. The utilization of these experts may facilitate the implementation of future USAID-funded health projects in Russia or the NIS.