

**Travel to Uganda in
Preparation for
RPM Plus Year
One Activities
under the
President's Malaria
Initiative, March 27
– 31, 2006:**

Trip Report

Management Sciences for Health
is a nonprofit organization
strengthening health programs worldwide.



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Tetteh, Gladys

April 2006

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Gladys Tetteh

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Strategic Objective 5

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About RPM Plus

The Rational Pharmaceutical Management Plus (RPM Plus) Program, funded by the U.S. Agency for International Development (cooperative agreement HRN-A-00-00-00016-00), works in more than 20 developing countries to provide technical assistance to strengthen drug and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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Acronyms

ACT	Artemisinin-based Combination Therapies
AED	Academy for Educational Development
AFRO	World Health Organization Africa Regional Office
AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral
CDC	US Centers for Disease Control
EDM	Essential Drugs and Medicines
GFATM	Global Fund to Fight AIDS, Tuberculosis & Malaria
HIV	Human Immunodeficiency Virus
JHU/CCP	Johns Hopkins University/Center for Communications Programs
JMS	Joint Medical Stores
MAC	Malaria Action Coalition
MOH	Ministry of Health
MSH	Management Sciences for Health
NMCP	National Malaria Control Program
NMS	National Medical Stores
NPO	National Professional Officer
PMI	President's Malaria Initiative
REDSO	Regional Economic Development Services Office
RPM Plus	Rational Pharmaceutical Management Plus
RTI	Research Triangle International
SOW	scope of work
SP	Sulphadoxine Pyrimethamine
USAID	United States Agency for International Development
USP	United States Pharmacopoeia
WHO	World Health Organization

Background

Management Sciences for Health's (MSH) Rational Pharmaceutical Management Plus (RPM Plus) Program has received funds from USAID to develop strategies to implement malaria policies and to provide technical assistance in pharmaceutical management issues for malaria. RPM Plus is a key technical partner in the USAID Malaria Action Coalition (MAC), a partnership among four technical partners: The World Health Organization (WHO), working primarily through its Africa Regional Office (AFRO), the US Centers for Disease Control (CDC), the ACCESS Program of JHPIEGO and RPM Plus.

RPM Plus has been working to improve pharmaceutical management for malaria in countries in Africa by identifying and addressing the causes of poor access, ineffective supply, and inappropriate use of antimalarials. RPM Plus has developed and applied tools to assess pharmaceutical management for malaria and has worked to provide technical assistance to countries by working with policymakers, researchers, managers, and providers in the public and private sectors to implement new and proven interventions. Significant among these interventions are Artemisinin-based Combination Therapies.

RPM Plus was approached by the USAID mission in Uganda in January 2006 to provide technical support to assist USAID and the MOH in implementing its malaria strategy. Specifically, the Uganda MOH, through its Global Fund resources has procured 1.8 million nets that are soon to arrive in country. An additional 300,000 nets will also be procured with support from the U.S. President's Malaria Initiative. Assistance is needed to develop a comprehensive distribution strategy targeting children under 5, pregnant women, and people already experiencing weakened health, such as HIV/AIDS patients. Assistance is also needed to support the roll-out of ACTs through the Uganda National Medical Stores and Joint Medical Stores up to the community level for malaria home based care and prevention. RPM Plus has developed and submitted to USAID/Uganda a SOW for the achievement of this support and will provide technical assistance through a recently recruited advisor to be based in Uganda as well as through the RPM Plus regional office in Nairobi, Kenya.

Purpose of Trip

Gladys Tetteh of the RPM Plus regional office in Nairobi, Kenya traveled to Kampala, Uganda to initiate introductory processes for RPM Plus support activities in-country. Gladys Tetteh works to provide RPM Plus support to countries in the African region and in the future will work closely with a Uganda-based recruited advisor through harnessing lessons learnt and sharing best practices gained through RPM Plus support to other countries in the region.

Scope of Work

The scope of work for Gladys Tetteh was to:

- Meet with USAID/Uganda to discuss the RPM Plus advisor position and to discuss specifics related to providing support to the Ministry of Health, Uganda

- Meet with the Program Manager, Malaria Control Unit to set the stage for the development of a detailed RPM Plus support workplan and to determine plans for scale up of malaria control interventions
- Meet with Ministry of Health stakeholders constituting the Task Force on Drug Procurement including the Malaria Control Unit, Pharmacy Section of MOH, National Drug Authority, National Medical Stores, Joint Medical Store, Planning Department of MOH, WHO/Uganda
- Meet with partner stakeholders working on implementation of the Ugandan ITN strategy to attain program targets and to ensure understanding and collaboration through acknowledgment of on-ongoing work by the various partners (private sector, civil society organizations and MOH).

Activities

Meet with USAID/Uganda to discuss the RPM Plus advisor position and to discuss specifics related to providing support to the Ministry of Health, Uganda

Two meetings were held with USAID/Uganda. An initial meeting was held with Ms. Annie Kaboggoza-Musoke on Wednesday March 29, 2006. A second meeting was held with Dr. Jessica Kafuko and Ms. Annie Kaboggoza-Musoke on Friday March 31, 2006 at the USAID office complex. Background information was provided on PMI Uganda funding, the Country Action Plan for Year One and additional explanatory inputs were made by Dr. Kafuko on how USAID/Uganda determined that RPM Plus should take on a role in the provision of technical assistance to pharmaceutical/logistics management of ACTs and ITNs. Beyond the logistic management scope, USAID/Uganda would like RPM Plus to provide support to the rational use of medicines within its SOW for the first year. USAID Uganda has already sent request for field support allocations to USAID Washington on Monday March 27 and RPM Plus will receive \$300,000 for the first year¹.

The job description for the RPM Plus senior technical advisor position was reviewed with minor changes proposed by the USAID/Uganda team. RPM Plus has received written consent for the advertisement of the position.

A PMI Uganda meeting is scheduled to take place in April and all PMI Uganda implementing partners (JHU/CCP-AFFORD, JSI-UPHOLD, AED-NetMark, MSI-MEMS, RTI-IVM, JHU/CCP-HCP, WHO, USP, and CDC) will be invited to attend the meeting.

Office space for the RPM Plus senior technical advisor was discussed. RPM Plus was encouraged to sit within the JHU/CCP-AFFORD project premises in Kololo, Kampala.

Meet with the Program Manager, Malaria Control Program to set the stage for the development of a detailed RPM Plus support workplan and to determine plans for scale up of malaria control interventions

A meeting was held with Dr. Fred Kato of the Malaria control programme. RPM Plus received a brief on ACT implementation activities. The NMCP has trained a core team of 30 national trainers and a zonal team of 700 persons to work as trainers at district level. To date three consignments of artemether-lumefantrine have been received by the National Medical Stores for distribution. The initial order of ACTs was quantified on the basis of population and usage and these quantities will be *pushed* to the districts (health facilities). Since subsequent orders will be *pulled* by the districts, technical assistance is needed for quantification of ACTs at the district level.

¹ After the TDY to Uganda, RPM Plus received a further request from USAID/Uganda to support fee payment (\$26,458) to the NMS for storage and distribution of 261,200 treatment doses of Coartem.

Meet with Ministry of Health stakeholders constituting the Task Force on Drug Procurement including the NMCP, Pharmacy Section of MOH, National Drug Authority, National Medical Stores, Joint Medical Store, Planning Department of MOH, WHO/Uganda

Meeting with David Bagonza, National Medical Stores

The National Medical Store has a role limited to providing logistics support within Uganda's ACT implementation strategy. Three consignments of ACTs (artemether-lumefantrine) have been received at the airport, cleared, warehoused and only 20% of the first consignment has been distributed to hospitals², health centres III and IV through standard allocations. Distribution cycles of the NMS are 2 monthly and it is anticipated that the second cycle of distribution to districts and health facilities should be based on quantified requests from the facilities. Tracking systems have been instituted for artemether-lumefantrine commodities within NMS's overall tracking system. Every 4 weeks, 3 standard reports will be sent by NMS to the NMCP i.e. stock position at NMS, inventory evaluation report and shipment receipt report. Reporting from health facilities has been proposed³ but not yet agreed upon by the Task Force on Drug Procurement, hence not yet instituted.

As far as challenges are concerned, (1) the NMS feels that the fact that no ceilings have been set by NMCP on order quantities by the district and the facilities could lead to excessive amounts of ACTs ordered; (2) NMS was not involved in drawing up the delivery schedule for arrival of artemether-lumefantrine to the country and as such the schedule is tight and the rate of receipt of the medicines is far exceeding the rate of distribution, hence overcrowded warehouses; (3) no consideration was made by the NMS for procurement of other antimalarials; (4) existent high stocks of SP with no clear strategy for the fate of HOMAPAK.

Meeting with Joseph Serotoke, WHO/NPO EDM

A meeting was held on 29th March at the WHO Uganda country office to discuss ongoing pharmaceutical management activities in support of ACT policy implementation. Under Global Fund financial support, Uganda has achieved a policy document development and printing, guidelines for treatment, quantification of quantities for Coartem for the 1st year of ACT policy implementation, placement of initial order and delivery and distribution schedules for Coartem.

Meeting with Dr. Monica Olewe, WHO/Inter-country team

Background was provide to RPM Plus on the key actions that have been implemented in preparation for use of artemether-lumefantrine by public, non-governmental and faith based health facilities in the country.

² All hospitals have received allocated quantities of artemether-lumefantrine, other health facilities in 3 out of the 5 regions served by NMS have received their allocations. 20% of stock consignment in NMS is yet to be consigned to the Joint Medical Stores (JMS).

³ Health facilities are already reporting on Diflucan and ARVs and could do the same for artemether-lumefantrine.

It was encouraged that RPM Plus be involved in ongoing work by the Task Force on Drug Procurement. Despite ongoing trainings on case management, WHO thinks there is still a need for a training on drugs and logistics management at the district level and this will require financial and technical support from RPM Plus.

Meet with partner stakeholders working on implementation of the Ugandan ITN strategy to attain program targets and to ensure understanding and collaboration through acknowledgment of on-ongoing work by the various partners (private sector, civil society organizations and MOH)

The NMCP (Dr. Kato) informed RPM Plus that the order for insecticide-treated nets with funding from the Global Fund has not been placed as yet. More information on the status of the order can be determined through the Vector Control/ITN working group.

At the WHO Uganda country offices, RPM Plus was told that information on nets could be better provided by Dr. Robert Azawire, WHO/NPO Malaria who was out of Kampala during RPM Plus's visit.

Next Steps

Immediate Follow-up Activities

- Revision of SOW for RPM Plus under the PMI (*see annex for revised document*)
- Advertisement of revised job description for RPM Plus Senior Technical Advisor position (*see annex*) on RPM Plus website and in Uganda local dailies (Vision) and regional papers (East African).
- Receipt of applications and recruitment of Senior Technical Advisor for RPM Plus (Uganda)
- Establishment of RPM Plus office space for Senior Technical Advisor
- Continued technical assistance provision by RPM Plus to the Uganda National Malaria Control Program under USAID/REDSO regional funding

Annex 1. RPM Plus SOW under PMI Uganda

Management Sciences for Health
Rational Pharmaceutical Management Plus Program
(RPM Plus)

Support to Malaria Control in Uganda
US President's Malaria Initiative

Scope of Work
April – December 2006

Draft for Discussion with USAID/Uganda

Introduction

On January 16th MSH/RPM Plus Director, Douglas Keene met with USAID/Uganda about potential pharmaceutical management technical support to assist USAID and the MOH in implementing its malaria strategy.

The Uganda MOH, through its Global Fund grant round 2 is procuring approximately 1.8 million nets that are soon to arrive in country and 15.5 million doses of Artemether-Lumefantrine have been ordered using GFATM round 4 resources. In addition, with the U.S. President's Malaria Initiative support to the MOH, 300,000 additional nets will be procured during this year with 261,200 Artemether-Lumefantrine doses for Northern Uganda through the WHO mechanism.

RPM Plus Assistance is solicited to support and strengthen the distribution of GFATM nets to children under 5, pregnant women, and other vulnerable populations such as people living with HIV/AIDS. The support is also needed for the handling and distribution costs of 261,200 PMI-procured treatment doses of artemether-lumefantrine as well as the pharmaceutical management aspects of the nationwide artemisinin-based combination therapy (ACT) roll-out led by the national malaria control program (NMCP). This support to NMCP will be provided through the Uganda National Medical Stores and Joint Medical Stores and will benefit malaria case management and prevention at the community and health facility levels. Whilst providing this technical assistance to the roll-out process, RPM Plus support will contribute to ensure the rational use of the selected expensive national first-line treatments.

Following is a draft scope of work proposed to address the immediate challenge presented by the imminent arrival of the bed nets and ACT medicines, while at the same time, laying the ground work for a longer-term, coordinated approach for the management of medicines and health commodities for malaria.

Background information

Uganda is one of the high burden countries in sub-Saharan Africa that has been selected by the United States Government (USG) to benefit from the recently launched President Malaria Initiative (PMI). The overall five-year \$1.2 billion initiative intends to rapidly scale up malaria prevention and treatment interventions with the goal of reducing malaria-related mortality by 50% through the achievement of 85% coverage of at-risk groups with four key interventions: artemisinin based combination therapy (ACT), intermittent preventive treatment (IPT) for malaria in pregnancy, insecticide-treated mosquito nets (ITNs), and indoor residual spraying with insecticides (IRS).

In Uganda, malaria is a leading cause of morbidity and mortality and accounts for 40% of outpatient visits, 25% of hospital admissions and 14% of hospital deaths. The burden of the disease is greatest amongst children under 5 years of age and pregnant women⁴. People living with HIV/AIDS (PLWA) have also increasingly become an added vulnerable group. A national

⁴ The Africa Malaria Report 2005

Roll Back Malaria (RBM) strategic plan (2001/2-2004/5)⁵ currently guides malaria control activities in Uganda and supports the use of (i) prompt and effective treatments, including home-based management; (ii) vector control, including insecticide-treated bed nets (ITNs) and indoor residual spraying (IRS); intermittent preventive treatment (IPT) during pregnancy; and (iv) epidemic preparedness.

Whilst there has been some progress in treatment and prevention efforts led by the Ministry of Health National Malaria Control Program (NMCP), it is envisaged that the implementation of the PMI Five-Year Strategy and Plan will serve to address the major unmet needs in achieving the Abuja targets. In implementing the PMI, USAID/Uganda mission is therefore committed to working with the Ministry of Health Uganda and within national existing malaria control plans. Priorities⁶ for the national malaria control program for 2005/2006 are depicted below:

Program Area	Activity
Case Management	<ul style="list-style-type: none"> • Strengthen laboratory services (microscopy and rapid diagnostic tests (RDTs)) • Strengthen medicine and supplies management including Artemisinin-based Combination Therapies (ACTs) • Pilot use of ACTs for home based management of fever (HBMF)
Vector Control	<ul style="list-style-type: none"> • Capacity building for indoor residual spraying (IRS) • Scale up insecticide treated net distribution
BCC/IEC	<ul style="list-style-type: none"> • Strengthen BCC/IEC for malaria control
M&E, Surveillance and Research	<ul style="list-style-type: none"> • Establish a pharmacovigilance system (emphasis on ACTs) • Documentation of best practices in malaria control • Strengthen community-based information system • Strengthen quantification and monitoring of malaria control inputs and outputs

RPM Plus participated in the initial PMI assessment in Uganda, Tanzania and Angola and has already provided support to Uganda through its regional activities funded by the Malaria Action Coalition/REDSO. Representatives from the National Malaria Control Program and the National Medical Stores in Uganda have participated in RPM Plus regional workshops on strengthening malaria pharmaceutical management capacities and improving quantification skills.

The RPM Plus program strategy proposed in support of the PMI implementation and the National Malaria Control and Prevention in Uganda is based on a pharmaceutical management system strengthening approach in the country in support of the implementation of the national malaria plan and its roll out into the country. The RPM Plus scope of work presented is for one year with a plan for expansion contingent upon continuity of the project.

⁵ Process of development of the next generation strategic plan has already began

⁶ Priorities presented at the Eastern Africa RBM annual review and planning meeting, November 2005

General Program Objectives

The objectives of the proposed scope of work are to:

- 1) To develop a plan of action for the national distribution of approximately 2 million ITNs to children under five and PLWHA.
- 2) To strengthen the existing pharmaceutical management system for the integration of 15.5 million treatment doses of Artemether-Lumefantrine⁷ into the drug distribution system and for the phasing out of old malaria therapies while supporting the National Medical Stores costs of handling and distribution of 261,200 PMI-procured treatment doses of Coartem.
- 3) To provide technical support to the Ministry of Health, Uganda to scale up its malaria control activities, with an emphasis on malaria treatment activities, particularly the roll-out and rational use of ACTs.

Preliminary Steps/Activities

1. To develop a plan of action for the national distribution of approximately 2 million ITNs to children under five and PLWHA.

Currently in Uganda 15% percent of the five million children under five and 12% of the 1.3 million expected pregnant women are using nets. To achieve 50% coverage of children under five, 1.8 million nets are needed⁸. In 2006, the NMCP intends to distribute approximately 2 million ITNs via a mass distribution campaign to children under five, and PLWHA.

RPM Plus proposes to work with the National Malaria Control Program to identify and strengthen the existing systems for storage, distribution and inventory management of health commodities including ITNs. This strategy will not only ensure the effective distribution to targeted end-users of the large number of ITNs expected in 2006 but will ensure the existence of robust distribution systems to facilitate the distribution of subsequent procurements of ITNs.

Activities proposed include:

- Coordination with the PMI partners involved in ITN procurement and distribution as well as the NMCP/MOH ITN partners to develop the action plan for ITN distribution
- Support to the development of procurement plans for ITNs and treatment kits
- Assessment of the district capacities to store and manage ITN distribution
- Support district medical stores in planning for the distribution of the ITNs provided by the Global Fund and the President's Malaria Initiative
- Support the monitoring of ITN distribution

⁷ The third consignment of staggered monthly consignments scheduled to arrive in Uganda until September 2006 has arrived.

⁸ President's Malaria Initiative, UGANDA. Malaria Country Action Plan (CAP), FY 2006

- 2. To provide support for the integration of 15.5 million treatment doses of Artemether-Lumefantrine into the existent drug distribution system and the phasing out of old malaria therapies while supporting the NMS for handling and distributing PMI-procured treatment doses of Artemether-Lumefantrine and providing technical assistance to strengthen the existing pharmaceutical management system**

This support will be provided in accordance with the Uganda ACT roll-out strategy. Three consignments of Coartem have arrived in Uganda and are being held in the National Medical Stores. Distribution of 20% of the initial consignment which arrived in January 2006 has been achieved and all hospitals have received Coartem as per the MOH/NMCP distribution schedule. Distribution of Coartem to lower facilities has been accomplished in 3 out of the 5 regions covered by NMS. Although planned that 20% of the Coartem assignments will be provided to the Joint Medical Stores for distribution to non-Governmental and Faith-Based Organizations, this is yet to be achieved.

Under PMI/Uganda funding, the NMS is to receive, store and distribute 261,200 USAID/PMI treatment doses to Northern Uganda as part of the “Jumpstart” activity. The associated cost of handling and distributing these doses by NMS - \$26, 458 US dollars will be paid by RPM Plus.

The monthly schedule for Coartem consignment deliveries vis-à-vis the two-monthly NMS commodity distribution cycle to the districts has led to a shortage of storage space for the arriving Coartem consignments.

In consultation with the NMCP and NMS, RPM Plus proposes to identify current challenges to the integration of Coartem treatment doses into the existing system of drug distribution by NMS and to provide support to the design and implementation of appropriate interventions. Activities proposed include:

- Meet with stakeholders involved in the management of ACT roll-out such as the National Malaria Control Program, Pharmacy Section of MOH, National Medical Stores (NMS), Joint Medical Stores (JMS), National Drug Authority (NDA), Planning Department of MOH, WHO/Uganda to ensure appropriate policy and programmatic coordination.
- In conjunction with the NMCP/MOH, meet with the NMS, the JMS and relevant PMI implementing partners to understand and document plans and challenges for storage and distribution of ACTs to the districts. This will be done in the context of the NMCP/MOH long term plan for ACT policy implementation as well as the PMI Five-Year Plan.
- Visit key target districts as identified by USAID and the NMCP/MOH to assess the capacity of the public sector to manage ACTs.
- With the Task Force on Drug Procurement and in accordance with the ACT roll-out strategy, ensure the detailing of the following elements within the operational plan for storage and distribution of ACTs:

- national level capacity and plans for receipt, storage and distribution of in-country as well as expected consignments of Coartem scheduled to arrive in Uganda until September 2006
- district health facility capacity and plans for receipt and storage of Coartem
- plans for determination and provision of support to district health facilities to enable the proper quantification of Coartem to guide their drug requisitions
- consideration for the determination, procurement and district distribution of other antimalarials in-line with a transition strategy for Homapak
- mechanisms for maintaining accurate inventory records and tracking of Artemether-Lumefantrine and other antimalarial medicines in use within the public sector
- strategies for covering storage and distribution costs and minimizing leakage to ensure malaria medicine availability at health facilities
- plans for phasing out chloroquine, limiting SP for IPT, properly managing SP in order to ensure its availability in health facilities and ANC clinics
- Reinforce the capacity of the National Medical Stores and Joint Medical Stores to manage the supply chain including the planning, quantification, implementation of national procurements for the public and private distribution of malaria medicines and commodities including ITNs.
- In conjunction with the NMCP and relevant stakeholders, support the existing commodity monitoring and evaluation system and strengthen key levels of the supply system in support of malaria control.
- Provide technical assistance to the strengthening of pharmaceutical management capacities at the district level to ensure an uninterrupted supply of quality malaria medicines and commodities.

3. To provide technical support to the Ministry of Health, Uganda to scale up its malaria control activities, with an emphasis on malaria treatment activities, particularly the roll-out and rational use of ACTs.

With the accelerated roll-out of Artemether-Lumefantrine in the public sector in Uganda, it is imperative that the rational use of the medicines is achieved. The inappropriate use of antimalarial medicines can quickly lead to development of resistance, treatment failure, adverse drug reactions (ADRs), and waste of financial resources. Therefore, achieving acceptable standards when using antimalarial medicines including Artemether-Lumefantrine is important in obtaining the potential maximum benefits for patients.

In this initial SOW, RPM Plus proposes to work with the NMCP, Pharmacy section/MOH and relevant PMI partners to achieve national level sensitization of bodies and committees on the definition and importance of the rational use of ACTs as well as achieve the adoption of strategies and interventions that can improve the rational use of Coartem. With the planned expansion of the project beyond the initial year, RPM Plus will expand this activity to focus on training at national and district level as well as education on rational use of Coartem. The growing concern of the rational use of insecticides is an area that also needs to be addressed under future SOWs.

Proposed activities include:

- In conjunction with the NMCP/MOH, design and adopt a strategy to promote rational use of ACTs at the district, health service delivery and community levels
- Provide technical guidance to the NMCP for the achievement of any outstanding key operational and technical actions needed for successful ACT policy implementation

Support Capacity and Staffing/Management Structure in Uganda

RPM Plus will support the described PMI activities in Uganda through an RPM Plus senior technical advisor to be based in Uganda, the RPM Plus regional office based in Nairobi, Kenya as well as the RPM Plus headquarters based in Arlington, Virginia, USA.

The Uganda-based senior technical advisor will provide full-time level of effort to the activities described in this SOW. He/she will report to the RPM Plus Regional Technical Advisor based in Nairobi, Kenya.

Program Outcomes

1. Efficient distribution of ITNs to MOH-selected target groups in Uganda
2. Efficient public-sector distribution and improved access to Artemether-Lumefantrine in support of ACT policy implementation
3. Improved rational use of Artemether-Lumefantrine practices
4. Improved national and district pharmaceutical management system/practices
5. Effective implementation of ACT policy

Deliverables

The major outputs of this SOW are:

1. A plan of action for the national distribution of approximately 2 million ITNS to children under five and PLWHA
2. An operational plan for storage and distribution of Artemether-Lumefantrine
3. Quarterly reports
4. Activity reports
5. Financial Accrual reports
6. Annual report

Timelines

The timeline for all activities within this SOW is from April 2006 – December 2006. Subsequent RPM Plus activities will be determined contingent upon continuity of the project.

Reporting

RPM Plus will provide quarterly reports and annual reports to the USAID/Uganda mission as well as other information requested for by the Mission. Periodic coordination meetings will be proposed to the different PMI implementers and USAID staff to increase synergies among partners and maximize PMI results in Uganda.

Annex 2. Job Description (RPM Plus Senior Technical Advisor)

POSITION DESCRIPTION

Center for Pharmaceutical Management (CPM)

Rational Pharmaceutical Management Plus (RPM Plus) Program

POSITION:	Senior Technical Advisor
BAND:	6
REPORTS TO:	RPM Plus Malaria Program Manager
LOCATION:	Kampala, Uganda

OVERALL RESPONSIBILITIES

The Senior Program Associate is responsible for coordinating and managing all field-based activities for the Rational Pharmaceutical Management Plus (RPM Plus) Program in Uganda. He or she is the primary liaison between RPM Plus and the USAID President's Malaria Initiative in Uganda, the Ministry of Health, stakeholders, and partners involved with pharmaceutical management activities and/or implementing malaria programs in Uganda. The Senior Technical Advisor manages the RPM Plus/Uganda office, provides strategic technical guidance and works closely with RPM Plus headquarters in Arlington, Virginia, the RPM Plus office in Nairobi, and other MSH projects in Uganda to ensure that MSH/CPM/RPM Plus plans and activities effectively address priority pharmaceutical and commodity management needs, especially for malaria case management and prevention, and rationale drug use. As the RPM Plus representative in Uganda, he or she supervises any RPM Plus staff based in Uganda and ensures the timely and quality delivery of RPM Plus products and activities.

The RPM Plus Senior Technical Advisor provides direct technical assistance to the National Malaria Control and Prevention Program to improve pharmaceutical management systems in support of the President's Malaria Initiative implementation. The main strategies will be implemented with the Ministry of Health Uganda and within national existing malaria control plans to scale up malaria control and prevention activities, with an emphasis on case management and the roll-out of ACTs and other malaria-related commodities.

SPECIFIC RESPONSIBILITIES

- Maintain all verbal and written communications with the USAID Mission in Uganda and represent RPM Plus in malaria-related meetings with external partners including the Ugandan Ministry of Health, the World Health Organization, the Global Fund, the World Bank, and other Roll Back Malaria (RBM) and President's Malaria Initiative (PMI) partners implementing malaria activities in Uganda,
- Provide support to the Uganda National Malaria Control Program (NMCP) for ACT policy implementation for appropriate policy and programmatic coordination for ACT implementation with stakeholders such as the National Malaria Control Program (NMCP), Pharmacy Section of MOH, National Drug Authority, National Medical Stores

(NMS), Joint Medical Store (JMS), Planning Department of MOH, WHO/Uganda, The Global Fund, World Bank, USAID/Kampala and all other relevant RBM and PMI partners in Uganda

- Work with partners to identify and coordinate commodity management priorities in support of the National Malaria Control and prevention Program
- Support the NMCP/MoH in the development and implementation of an ACT distribution plan in conjunction with the local authorities and all relevant RBM and PMI partners for the ACT implementation strategy roll out
- Support the NMCP/MOH in the development and implementation of a storage and distribution plan for Impregnated Treated Nets in coordination with the local authorities, the private sector distribution networks, the social marketing program and all other relevant RBM partners.
- With the NMCP/MOH input, develop country plans and budgets for RPM Plus technical assistance to Uganda in coordination with RPM Plus Arlington-based program technical staff.
- Maintain close interaction with RPM Plus Malaria Program Manager based in Arlington to ensure adequate support to the Uganda country program, completion of work and the achievement of targets in a timely fashion that is within budget. He or she ensures that plan adjustments are made as necessary.
- Oversee the implementation of RPM Plus activities in conjunction with the NMCP/MOH at the national, regional, district, and facility levels ensuring that all activities are adequately and timely implemented, and that they adequately address pharmaceutical and commodity management needs at the different levels of the system.
- Provide technical assistance to NMCP/MOH and other stakeholders in the management and monitoring of rationale drug use.
- Provide technical assistance to NMCP/MOH agreed program activities and review technical reports developed by other team members and/or consultants ensuring the quality of delivered products.
- Monitor RPM Plus training for NMCP/MOH and on-site technical assistance activities in Uganda, ensuring the development of local capacities needed to maintain adequate pharmaceutical management systems in support of the implementation and expansion of malaria interventions.
- Provide monthly activity updates to NMCP/MOH, and to USAID/Kampala, and develop quarterly and annual progress reports to be submitted to RPM Plus in Arlington and to USAID/Washington as required.

- Manage day-to-day RPM Plus country office operations and serve as a liaison with the RPM Plus/MSH home office in the United States to ensure that logistics, contracts, letters of agreement, and any approvals are adequately in place in support of program activities. Also, ensure adherence to office management and accounting procedures.
- Supervise RPM Plus assigned staff and consultants through regular meetings to track work progress and to provide guidance necessary for ensuring consistent quality of work performed and adherence to Uganda Ministry of Health, USAID, and MSH policies, guidelines, and values. Identify and recommend local staffing needs and ensure that MSH administrative procedures for hiring are adequately adhered to.

QUALIFICATIONS

- Advanced degree in a health related field, preferably pharmacist qualification, and additional qualification in management, public health, information technology or a related discipline required.
- Demonstrated managerial and organizational skills in a developmental setting with flexibility to adapt to changing priorities and deadlines.
- Experience (at least five years) within the health sector in Uganda with understanding of key malaria issues.
- Significant experience (at least five years) in supply chain management and management of related information systems in the health sector.
- Experience in monitoring and evaluating drug management and rational use in developing countries, preferably in East Africa.
- Experience working with USAID-funded programs highly desirable.
- Partnership experience with programs supported by international agencies such as WHO, World Bank, Global Fund and bilateral agencies such as USAID preferred.
- Excellent interpersonal skills; demonstrated ability to interact professionally with a culturally diverse staff, clients, and consultants.
- Proficiency in English including speaking, understanding, writing and reading with the ability to write lucid technical reports and documents in English is required. Proficiency in local languages helpful.
- Demonstrated computer skills in Microsoft Office Suite applications, including Word, Excel, PowerPoint, and Outlook. Experience in Information Technology will be a plus.
- Ability and availability to travel within Uganda and internationally as needed.

- Long-term working resident experience in Uganda preferred.

Management Sciences for Health is an equal opportunity employer offering employment without regard to race, color, religion, sex, sexual orientation, age, national origin, citizenship, physical or mental handicap, or status as a disabled or Vietnam Era veteran of the U.S. Armed Forces.

To apply for this position please send a cover letter and CV, indicating position of interest, to:
ProjectJobs@msh.org