

Workshop for the Pan American Health Organization Strategic Fund In Tobago, 26 – 28 July 2006: Trip Report

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About RPM Plus

RPM Plus works in more than 20 developing and transitional 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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Key Words

PAHO, PAHO Strategic Fund, MSH,

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
CAREC	Caribbean Epidemiology Center
CARIPROSUM	Caribbean Procurement Supply Management
COHAN	Cooperation of Antioquia Hospitals
GFATM	Global Fund to Fight AIDS Tuberculosis and Malaria
HIV	Human Immune Deficiency Virus
LAC	Latin American Countries
MSH	Management Sciences for Health
OCPC	Office of Caribbean Program Coordination
PAHO	Pan American Health Organization
RPM Plus	Rational Pharmaceutical Management Plus program
TB	Tuberculosis
USAID	United States Agency for International Development
WHO	World Health Organization

BACKGROUND

Pan American Health Organization (PAHO) Strategic Fund was established in September 2000 to assist Latin American and Caribbean countries in ensuring continuous availability of affordable Strategic Public Health Supplies for priority public health programs. It aims to build capacity in pharmaceutical management, procurement programming and planning, and quality assurance/control of products in participating countries. This mechanism is considered as an option for the implementation of projects sponsored by the Global Fund for AIDS, Tuberculosis and Malaria (GFATM).

In the Latin American Country (LAC) Region, Management Sciences for Health's Rational Pharmaceutical Management Plus (MSH/RPM Plus), a USAID funded project is working in coordination with PAHO and the local USAID missions to effectively improve pharmaceutical management in tuberculosis programs. After the organization of two regional workshops on Pharmaceutical Management for TB programs in Honduras and Mexico (2004), RPM Plus programmed FY04 USAID LAC resources for technical assistance to follow up on specific country requirements.

PAHO represented by the Office of Caribbean Program Coordination (OCPC) in Barbados with the support of Caribbean Epidemiology Center (CAREC) has invited MSH/RPM Plus to a Regional workshop in Scarborough, Tobago (July 26 – 28). The objective of the workshop is to present the Strategic Fund to participating countries, key technical partners and global fund projects to strengthen capacity in pharmaceutical procurement planning and supply management; to improve the availability of affordable, quality assured public health medicines and commodities throughout the region.

Purpose of Trip

To participate as a facilitator in the workshop for the PAHO Strategic Fund.

Scope of Work

- Participate as facilitator in the Workshop for the PAHO Strategic Fund
- Present to the participants documents and tools prepared by RPM Plus for the improvement of HIV/AIDS quantification and procurement monitoring
- Brief/debrief the USAID mission, as requested

ACTIVITIES

Participate in the workshop for PAHO Strategic Fund: workshop proceedings

The Caribbean workshop for PAHO Strategic Fund commenced on July 26, 2006 with main overall objectives of presenting the PAHO Strategic fund to the Caribbean countries and to identify next steps for implementation to countries that have recently signed up to procure pharmaceutical products through the strategic fund.

The main expected outcomes from the workshop include:

- Shared understanding of the technical and operational framework of the PAHO strategic fund
- Knowledge of Strategic Fund country experiences in Latin American and perspectives for the Caribbean
- Identification of country support requirements through the Strategic Fund and links with CARIPROSUM

The workshop commenced with an overview of PAHO Strategic Fund procurement and technical assistance functions and activities that are available to countries in the region. Information presented included the mechanisms that facilitate access to medicines and strategic public health supplies throughout the region; technical framework of PAHO Strategic Fund; how countries can participate in the fund; operational procedures and resources.

This was followed by Caribbean country experiences on opportunities and challenges for promoting the supply and use of diagnostics. The following countries presented their experiences: Trinidad, Guyana, Barbados, and Organization of Eastern Caribbean countries.

Discussions on day two commenced with country experiences of procurement agencies in the Caribbean about development of national procurement plans or procurement plans for global fund projects. This was followed by presentation of a technical guide for procurement planning of strategic health supplies developed by PAHO, COHAN and MSH.

Afternoon sessions commenced with group discussions with a task of reviewing the technical procurement planning guide. This was later followed with plenary discussion on the opportunities and challenges for Strategic Fund participation.

Day three activities began with presentations to provide an update on Caribbean Procurement Supply Management (CARIPROSUM) Work Program. The main objective of the session included to:

- Disseminate information on CARIPROSUM, the regional network of procurement agencies in the Caribbean, and to present an update on activities and the proposed work program.
- Discuss the application of indicators characterizing procurement structures and processes through CARIPROSUM: pertinence and applicability.

Following that, an MSH/RPM Plus representative presented information on forecasting of HIV/AIDS commodities. Information was also presented on measuring performance of Caribbean countries by MSH/RPM Plus, PAHO and OECS.

The rest of the afternoon was spent discussing in plenary to identify and document core indicators required for procurement agencies.

The workshop ended with presentation of outcomes and recommendations for review by participants. All participants reached consensus to incorporate a few changes into the recommendations. For more details, see annex 2.

Participate as facilitator in the Workshop for the PAHO Strategic Fund

An MSH/RPM Plus representative presented on forecasting of HIV/AIDS commodities, methods and tools. The main objective of this session was to:

- Present information on available methods and tools for forecasting or estimating HIV/AIDS commodities.
- To execute a practical exercise in forecasting of HIV/AIDS commodities.

For details of the presentation see annex 3.

Another presentation on measuring performance of Caribbean countries was delivered in collaboration with PAHO. Information on reference performance indicators for centralized procurement agencies was presented. Main objectives of the session was to:

- Review reference performance indicators in relation to actual indicators applied within Caribbean procurement agencies.
- Develop a program of work leading to the harmonization of core indicators that measure performance of Caribbean procurement agencies.

For details of the presentation see annex 3.

Present to the participants documents and tools prepared by RPM Plus for the improvement of HIV/AIDS pharmaceutical management

MSH/RPM Plus resources and tools for HIV/AIDS, TB and Malaria on pharmaceutical management were presented to participants. For TB, copies of the *Managing Pharmaceuticals and Commodities for Tuberculosis: A Guide for National TB Programs* was given to participants to promote pharmaceutical management in TB programs.

Brief/debrief the USAID mission, as requested

Briefing and debriefing was not requested from USAID.

Collaborators and Partners

PAHO, CAREC, CARPROSIM

Adjustments to Planned Activities and/or Additional Activities

No adjustments were made.

ANNEX 1. WORKSHOP AGANDA



Caribbean Workshop for the PAHO Strategic Fund:

A Renewed Focus on Procurement and Supply Management of Medicines and Strategic Public Health Supplies

26 – 28 July 2006

Hilton Hotel, Tobago.

Pan American Health Organization (PAHO) / World Health Organization (WHO)

Wednesday, July 26

8.30 – 9.15 Inauguration

1. Opening Remarks. Representative Unit of Essential Medicines, Vaccines and Health Technologies, PAHO Washington
2. Opening Remarks: PAHO Representative, Trinidad & Tobago
3. Inauguration of Event: Ministry of Health, Trinidad & Tobago.

9.15 – 10.00 Presentation of participants, objectives and expectations.

10.00 – 10.20 Coffee

Session 1: The PAHO Strategic Fund: linking procurement planning and quality in the acquisition of Strategic Public Health Supplies

Objectives:

1. Present the PAHO Strategic Fund to Caribbean countries as a mechanism that facilitates Access to medicines and strategic public health supplies throughout the Region.
2. Present the technical framework of the PAHO Strategic Fund, the renewed focus in quality, procurement and supply management of strategic public health supplies, and the experience of countries participating in the Strategic Fund in 2005.

10.20 – 12.30: Round Table #1: Presentation of the Strategic Fund

- The PAHO Strategic Fund as a strategy promoting Access to Medicines in the Americas
- The renewed focus of the PAHO Strategic Fund: Technical Cooperation in 2005
- Prequalification of products and suppliers, and Quality Control of products
- The experience of Guatemala in the PAHO Strategic Fund

Participants: J. Bermudez, J. Fitzgerald, JM Parisi, J. Fitzgerald.

Moderator: C. Rerat, CPC Barbados

12.30 – 2.00 Lunch

Session 2: Participating in the Strategic Fund: a commitment between PAHO and its Member States

Objectives:

3. To present how countries can participate in the PAHO Strategic Fund and the commitment that this represents between PAHO and the Member State
4. To present operational procedures for the PAHO Strategic Fund and how Member States can purchase through the Strategic Fund
5. To present how countries can obtain updated information on the Strategic Fund.

2.00 – 4.00: Round Table #2: The Operational Framework of the Strategic Fund

- The Strategic Fund legal and operational framework
- Procedures for the procurement of Strategic Public Health supplies through the Strategic Fund
- Member State commitments in Strategic Fund participation
- Strategic Fund communications: web-page, documents and reports.

Participants: J. Fitzgerald, P. Ramos, C. Rerat.

4.00 – 4.15 Coffee

Session 3: Promoting the supply and use of diagnostics: opportunities and challenges from the Caribbean perspective

Objectives:

6. To identify challenges that Caribbean countries face in the procurement and supply management of diagnostics used in HIV/AIDS and related opportunistic infections

4.15 – 5.00 Opportunities and challenges in procurement and supply management of diagnostics used in HIV/AIDS and related opportunistic infections

G. Hirnschall Director CAREC

Thursday, July 27

Session 4: Assessing the challenges in procurement planning of medicines in the Caribbean.

Objectives:

7. To present the experiences of procurement agencies in the Caribbean in the development of national procurement plans or procurement plans for Global Fund projects.

- 8.30 – 9.15 The Jamaican experience in annual procurement planning of medicines used in the public sector
- 9.15 – 10.00 The experience of the PPS/OECS in procurement planning for the HIV/AIDS Global Fund financed project
- 10.00 – 10.20 Coffee

Session 5: Presentation of the Technical Guide for Procurement Planning of Strategic Public Health Supplies

Objectives:

- 8. To support procurement planning processes through the application of a technical guide that considers procurement as one element of the supply chain management process.

- 10.20 – 11.00 PAHO / COHAN / MSH Technical Guide for Procurement of Strategic Public Health Supplies

J. Fitzgerald Strategic Fund Coordinator PAHO

Working Groups

Objectives:

- 9. To review the Technical Guide for Procurement Planning of Strategic Public Health supplies, and to assess utility as a technical support tool in procurement planning and supply management assessments in the Caribbean.
- 10. To review opportunities and challenges for the increased participation of Caribbean countries in the PAHO Strategic Fund.

<i>Working Group</i>	<i>11.00am – 12.30pm</i>	<i>2.00 – 3.30pm</i>
#1	Review of Technical Procurement Planning Guide	Opportunities and Challenges for SF participation
#2	Opportunities and Challenges for SF participation	Review of Technical Procurement Planning Guide

- 3.30 – 3.50 Coffee
- 3.50 – 5.00 Presentation of outcomes from Working Groups

Friday, July 28

Session 6: *Networking procurement agencies in the Caribbean : An update on the CARIPROSUM Work Program*

Objectives:

11. To disseminate information on CARIPROSUM, the regional network of procurement agencies in the Caribbean, and to present an update on activities and the proposed work program.
12. To discuss the application of indicators characterizing procurement structures and processes through CARIPROSUM: pertinence and applicability.

8.30 – 9.10 Presentation of CARIPROSUM, its mandate and work program

M. Hinds Barbados Drug Service

9.10 – 9.40 Presentation of CARIPROSUM Structural and Process Indicators, 2005: data characterizing procurement agencies in the Caribbean.

J. Fitzgerald PAHO Brazil

9.40 – 10.15 Discussion:
- prioritizing activities within CARIPROSUM
- utilizing CARIPROSUM indicators to update information on participating procurement agencies
- linking CARIPROSUM with the PAHO Strategic Fund

10.15 – 10.30 Coffee

Session 7: *Forecasting of HIV/AIDS Commodities / Methods and tools*

Objectives:

13. To present information resources on available methods and tools for forecasting and estimating HIV/AIDS commodities
14. To execute a practical exercise in forecasting of HIV/AIDS commodities within the context of scale-up.

10.30 – 12.30 An overview of information resources for forecasting needs in HIV/AIDS prevention and treatment

Forecasting HIV/AIDS commodities in scaling up interventions: a practical experience

Facilitated by :MSH

12.30 – 2.00 Lunch

Session 8: Measuring Performance of Caribbean Procurement Agencies

Objectives:

15. To review reference performance indicators in relation to actual indicators applied within Caribbean procurement agencies.
16. To develop a program of work leading to the harmonization of core indicators that measure performance of Caribbean procurement agencies.

2.00 – 2.30 Presentation of reference performance indicators for centralized procurement agencies
MSH and PAHO

2.30 – 2.50 The experience of the PPS/OECS in applying performance indicators
F. Burnett Director PPS/OECS

Working Groups 2.50 – 4.30

- Identification of core indicators
- Proposal develop for implementation of core indicators through CARIPROSUM

Meeting Closure 4.30 – 5.00

- Presentation of key outcomes of the meeting and recommendations
-

ANNEX 2. OUTCOMES AND RECCOMENDATIONS

The Caribbean Strategic Fund Workshop

Tobago 26 – 28 July 2006

Outcomes:

1. Improving access to Strategic Public Health supplies is a priority in Caribbean countries, where principle determinants in product sourcing and availability, pricing, procurement and supply management, and intellectual property regulation need to be addressed. The PAHO Strategic Fund presents an opportunity for Caribbean countries, as one element of an overall strategy in access to medicines that countries should develop, in order to improve availability and affordability of Strategic Fund Public Health Supplies.
2. The PAHO Strategic Fund is a mechanism that links technical cooperation in procurement and supply management with product acquisition, targeting support to countries and Global Fund financed projects. The operational framework requires the active participation of PAHO Member States as well as technical and administrative units of PAHO at the regional and national level.
3. The PAHO Strategic Fund ensures the quality of products supplied using a quality assurance system built on processes of prequalification (WHO and PAHO), quality management in procurement, and requirements that countries implement appropriate quality controls on receipt of product.
4. To maximize the impact of the Strategic Fund requires the effective collaboration and cooperation between PAHO and the Caribbean Member State. A political commitment is required by participating countries to work with PAHO and key partners in addressing problems identified in procurement and supply management, to strengthen national supply systems, and to modify norms and regulations that facilitate participation of Member States in the fund mechanism.
5. The Caribbean Strategic Fund workshop represents the first component of a roll-out plan for the PAHO Strategic Fund in the Caribbean. This follows the successful launch of the Strategic Fund in Central America and Andean countries in 2005 – 2006, and the participation of the 17 countries throughout the Americas in Fund activities. The meeting acknowledged examples of how the Strategic Fund has supported countries in Central America and Andean region in improving access to public health supplies at affordable costs.
6. Caribbean countries have identified challenges in the procurement and supply of management of diagnostics used in HIV/AIDS and related opportunistic infections,

highlighting the need to improve capacity in selection of technologies, product forecasting and purchase. Countries recognized the challenges in coordinating management of financing from separate channels, supplier participation in procurement processes, stock management and distribution, as well as the technical support that has been received from international agencies, and specific initiatives in the Region.

7. The Global Fund has represented an important opportunity for Caribbean countries to scale-up the national and regional response to HIV/AIDS. Procurement planning for HIV/AIDS commodities is a critical component of the scale-up process in the Caribbean, that requires an intense and coordinated effort at the national level to collect and process data, estimate needs, execute tenders and product orders, receive and distribute product. Participating countries have recognized the need to initiate planning to ensure the sustainability of processes once the Global Fund financing is no longer available.
8. The Strategic Fund has developed technical documents and a communication strategy, including bulletins and web-page, to provide operational and technical information on the Strategic Fund to Caribbean countries.
9. Caribbean countries reviewed and endorsed the preparation of the technical document, Practical Guide for the Procurement of Strategic Public Health Supplies through the PAHO Strategic Fund, to strengthen planning processes at the national level in procurement and supply management. Participating countries have provided comment on the technical document which will be reviewed and incorporated by PAHO, Management Sciences for Health (MSH) and COHAN Colombia, as joint authors of the manual.
10. Training in quantification for HIV/AIDS related commodities is a priority in the region in order to ensure continuous availability of product for national programs and persons living with HIV/AIDS. Caribbean countries acknowledged that effective product forecasting will depend on availability and accuracy of raw data, and the participation of multiple actors in the planning process. Countries received information on one approach for product quantification, as well as a simple tool to support the needs estimation process.
11. Caribbean countries have identified the opportunities that the Strategic Fund presents, highlighting possible benefits in lowering prices of strategic public health supplies in the region, reductions in lead times, an increase in supply options, and facilitation of product acquisition for specific products. Challenges noted included development of procurement plans at the national level, application of norms in product registration on receipt of product, and coordination of activities between PAHO and the countries.
12. Participating countries considered the work program of CARIPROSUM (the Caribbean Regional Network of Procurement and Supply Management Agencies) noted the importance of this network in strengthening the availability and affordability of strategic public health supplies in the region, and recognized the importance of linking this initiative with activities of the PAHO Strategic Fund in Caribbean countries.

13. The Strategic Fund workshop received information on initiatives and experiences of Caribbean countries in the development and application of performance management indicators for centralized procurement agencies and acknowledged the importance of strengthening the program of work to measure performance and service level of participating procurement agencies.

Recommendations

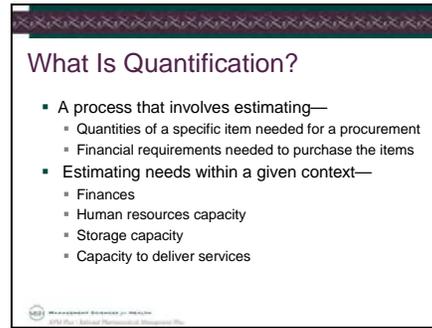
1. Caribbean countries prioritize access to medicines in the development and implementation of health, medicines, science and technology national policies, and adopt appropriate measures to improve the availability and affordability of Strategic Public Health Supplies. Countries avail of the opportunity that the PAHO Strategic Fund presents in improving access to and lowering prices of public health supplies in the Caribbean.
2. Caribbean countries review the benefits of participating in the PAHO Strategic Fund and commitments required within the country to maximize the benefit. Caribbean countries assess national norms and regulations to facilitate access to the PAHO Strategic Fund for procurement of those strategic public health supplies that present important challenges in acquisition in the Caribbean region.
3. Caribbean countries strengthen procurement planning and supply management of public health products, addressing the needs of the supply process as an integrated system, prioritizing key issues such as product forecasting and quantification, supply system assessment, and supplier management. Caribbean countries avail of support from the PAHO Strategic Fund and its collaborating partners in strengthening national systems.
4. Caribbean countries identify focal points within the Ministry of Health to coordinate national Strategic Fund activities with PAHO country offices, the PAHO sub-regional program in medicines and health technologies, CAREC and the regional coordination mechanism for the PAHO Strategic Fund.
5. PAHO Strategic Fund provide support to Caribbean countries in the development of procurement plans, including the assessment of supply systems, product forecasting and quantification of strategic public health supplies. The Strategic Fund provide updated information to Caribbean countries through extension of activities and communication to the Caribbean region.
6. The PAHO Strategic Fund finalize the Practical Guide for the Procurement of Strategic Public Health Supplies, incorporating comments from Caribbean countries, and utilizing the guide to improve capacity in procurement planning of strategic public health supplies.

7. The PAHO Strategic Fund, jointly with its participating partners MSH, prioritize capacity building in product forecasting and quantification, development of procurement plans, and the rational use and surveillance of strategic public health products in the Caribbean.
8. CARIPROSUM (the Caribbean Regional Network of Procurement and Supply Management Agencies) continue to develop the work program to address common issues in procurement and supply of medicines and health products. In addition, CARIPROSUM will review possible links with the PAHO Strategic Fund and identify opportunities for the network to utilize the fund mechanism to strengthen the network and its participating procurement agencies.
9. CARIPROSUM review the procurement agency core functions which should be monitored using a system of indicators, and develop a technical document proposing a series of performance and service level indicators for Caribbean procurement agencies. PAHO implement indicators to measure the performance of the PAHO Strategic Fund.
10. PAHO follow-up the Caribbean regional workshop for the Strategic Funds with individual country consultations when requested, to discuss the participation of individual countries in the fund mechanism and define the operational and technical framework for the Strategic Fund in that country.

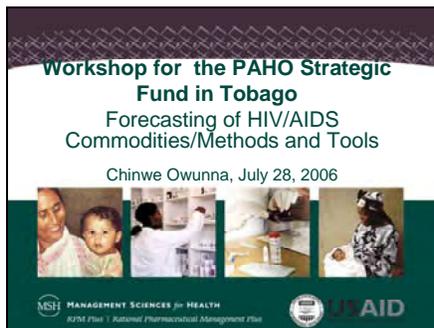
ANNEX 3. PRESENTATIONS ON FORECASTING OF HIV/AIDS COMMODITIES



Slide 1



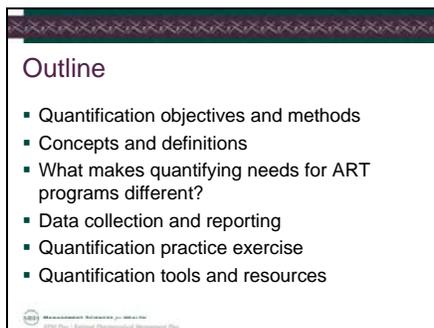
Slide 4



Slide 2



Slide 5



Slide 3



Slide 6

Consumption Method

- Uses data on medicines consumption
- Predicts future needs most accurately when current usage patterns will continue
- Comparison with morbidity-based method allows an estimate of the extent to which current consumption
 - Addresses priority health needs
 - Reflects rational use of medicines

Slide 7

Quantification Concepts and Definitions (2): Scaling Up

- An incremental increase or growth in the number of patients being treated over a period of time
- For scaling up, quantities can be expressed in "patient months"
- One "patient months supply" is the quantity needed to supply 1 patient for 1 month

Slide 10

Morbidity Method

- Used for new programs or for programs where consumption data are not available
- Forecasts the quantity of medicines needed for prevention/treatment of specific diseases based on projections of the incidence of those diseases
- Most complex and time-consuming of all four methods

Slide 8

Quantification Concepts and Definitions (3)

Slide 11

Quantification Concepts and Definitions (1)

- Procurement period
 - The time from order to order
- Lead time
 - The time between when the order is prepared and when it is available for issue
- Safety stock
 - Amount of stock kept in reserve to allow for a delay in supply or a sudden increase in demand; usually, safety stock at least covers needs during the lead time

Slide 9

What Makes Quantifying Needs for ART Programs Different?

Slide 12

ARV Product Characteristics

- ARV products—
 - Often have a short shelf life
 - Are expensive; especially second-line ARVs
 - Require secure and often temperature-controlled storage or refrigeration
- Paediatric formulations—
 - Limited product stability after reconstitution or opening
 - Lack of fixed-dose combinations (FDCs)—
 - Splitting solid-dose products
 - Appropriateness of doses

Slide 13

Programmatic Considerations: Continuing Patients

- Need for regimen based patient data (consumption)
- Deaths
- Loss to follow-up/ transfers out
- Changes in regimen
 - Weight; pregnancy; treatment failure; adverse drug reactions (ADRs); co-morbidities
- Paediatrics
 - Changes in dose as children grow; wastage of liquids
 - Changes in ability or willingness to swallow tablets and capsules and tolerance to liquids

Slide 16

Antiretroviral Therapy Considerations

- Scientific field is rapidly evolving
- Effect of stock-outs is serious
- At the moment ART is for life
- ART is used for prevention and treatment
- Multiple drug therapy is required
 - Three or more medicines, and all must be available
 - Can be fixed-dose combinations, patient packs, and/or single products
- Multiple regimens are used
- Resistance evolves quickly and is inevitable

Slide 14

Programmatic Considerations: Scaling Up—Unpredictability in Rate

- Push for rapid and enormous scale-up
- Limited capacity to deliver services
- Limited capacity of supply systems
- Availability and demand for HIV testing
- Client demand for ART
- Delays in disbursement of donor funds
- Unpredictability in level of funding available

Slide 17

Paediatric ART Considerations

- Standard treatment guidelines contain less detail for children's needs, especially for post-exposure prophylaxis
- Knowledge of the regimen does not automatically translate into specific products or dispensing quantities
- Different dosing recommendations exist



Slide 15

Supply Considerations

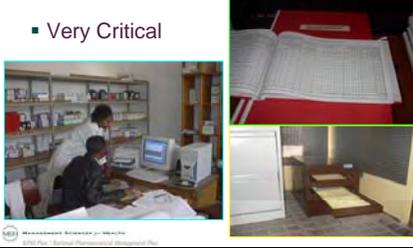
- Oligopoly
- Rapidly changing market
- Special pricing
- Donations
- Unpredictable and long lead times, shortages
- Prequalification or regulatory approval
- Paediatrics – lack of incentives to develop new products and FDCs



Slide 18

Data Collection and Reporting

- Very Critical



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ART/PAHO Strategic Fund Operational Research Plan

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Data Needs for ART Quantification

- Name and number of facilities providing or to provide ART
- Number of patients currently on ART at each facility and past growth trends
- Treatment goals and targets for each facility
- Attrition percentages or numbers (due to death, loss to follow-up) at each facility
- Number of patients currently on each ART regimen by facility
- Average monthly consumption of pediatric formulations
- National- or facility-level ART STGs
- Procurement period
- Lead time
- Safety stock
- Quantity in stock (and expiry dates) and quantity on order

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ARV Data Collection and Reporting

- Inaccurate or lack of ART data is universally identified as a major constraint to successful quantification
- Extracting and aggregating ARV patient data from manual tools can be problematic, especially as programs scale up
- Sites need simple tools (including simple software) and assistance to collect, analyze and report data
- Efficient, timely, and accurate reporting at facilities contributes to successful national quantification

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Slide 20

Quantification Practice Exercise

- Use the handouts provided for practice exercise

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ART Data Collection Tools

- Manual tools
 - Forms and records of ARV medicine consumption and regimen-based patient data
 - ARV stock control cards
 - Patient log book
- Electronic tools
 - For stock management and/or patient monitoring
 - Excel spreadsheet
 - Automatically process the data and generate reports with ease

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Organizing Data for Quantification

- Organize data (according to different ART profiles)
 - Existing and new patients, first-line and second line regimens, adults and pediatrics
- Aggregate data (according to similar characteristics)
 - Smaller facilities together, similar treatment profiles, programs, or procurement source

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Slide 24

Organizing Data for Quantification of ARVs

Table	Organized by facility, stratified by adults and pediatrics				Two facilities Total patients at Health Center A and B	All facilities Total adults patients for all facilities
	Total patients at Health Center A	Total patients at Health Center B	Total patients at Health Center A and B	Total patients at Health Center A and B		
ADULTS	191	181	372	191	191	191
PEDIATRICS	2	2	4	2	2	2
Total patients	193	183	376	193	193	193
Percentage of adults who used each ART	46%	39%	34%	34%	70%	43.77%

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2. For each ART regimen used by each group, calculate the quantity of each ARV product needed per month.

Adults:

Regimen	Possible Choice of Products	Regimen	Options: Quantity Required per Month Based on Available Products
ART 1 (ZDV + AZT)	ZDV 300mg, AZT 300mg	ART 1 (ZDV + AZT)	60 units of ZDV + 60 units of AZT for the first 2 weeks of treatment
ART 2 (ZDV + AZT + 3TC)	ZDV 300mg, AZT 300mg, 3TC 150mg	ART 2 (ZDV + AZT + 3TC)	60 units of ZDV + 60 units of AZT + 30 units of 3TC for the first 2 weeks of treatment
ART 3 (ZDV + AZT + 3TC + NVP)	ZDV 300mg, AZT 300mg, 3TC 150mg, NVP 200mg	ART 3 (ZDV + AZT + 3TC + NVP)	60 units of ZDV + 60 units of AZT + 30 units of 3TC + 20 units of NVP for the first 2 weeks of treatment
ART 4 (ZDV + AZT + 3TC + NVP + EFV)	ZDV 300mg, AZT 300mg, 3TC 150mg, NVP 200mg, EFV 600mg	ART 4 (ZDV + AZT + 3TC + NVP + EFV)	60 units of ZDV + 60 units of AZT + 30 units of 3TC + 20 units of NVP + 60 units of EFV for the first 2 weeks of treatment

Slide 28

- ### ART Quantification: Steps
- Convert the numbers of ART patients to percentages for each group.
 - For each group, list the ART regimen used or required and calculate the quantity of each drug product needed per treatment (if acute) or per month (if chronic and/or scaling-up) for each regimen.
 - Define the total number of patient-months or duration of therapy for each group.
 - Requirement = the % of patients on each regimen x quantity of medicines required per month (or per treatment) x number of patient-months or duration.
 - Sum the total requirements for each ARV product across all groups.

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2. For each ART regimen used by each group, calculate the quantity of each ARV product needed per month.

Pediatrics:

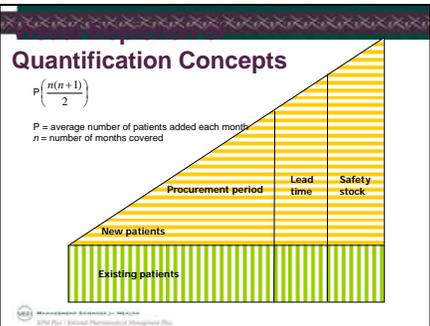
Regimen	Possible Choice of Products	Regimen	Options: Quantity Required per Month Based on Available Products
ART 1 (ZDV + AZT)	ZDV 150mg, AZT 150mg	ART 1 (ZDV + AZT)	30 units of ZDV + 30 units of AZT for the first 2 weeks of treatment
ART 2 (ZDV + AZT + 3TC)	ZDV 150mg, AZT 150mg, 3TC 75mg	ART 2 (ZDV + AZT + 3TC)	30 units of ZDV + 30 units of AZT + 15 units of 3TC for the first 2 weeks of treatment
ART 3 (ZDV + AZT + 3TC + NVP)	ZDV 150mg, AZT 150mg, 3TC 75mg, NVP 100mg	ART 3 (ZDV + AZT + 3TC + NVP)	30 units of ZDV + 30 units of AZT + 15 units of 3TC + 10 units of NVP for the first 2 weeks of treatment
ART 4 (ZDV + AZT + 3TC + NVP + EFV)	ZDV 150mg, AZT 150mg, 3TC 75mg, NVP 100mg, EFV 300mg	ART 4 (ZDV + AZT + 3TC + NVP + EFV)	30 units of ZDV + 30 units of AZT + 15 units of 3TC + 10 units of NVP + 30 units of EFV for the first 2 weeks of treatment

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1. Convert the number of ART patients to percentages for each group.

Table	Numbers	Pediatric Hospital	
		Option 1: Percentage of all patients on each regimen	Option 2: Percentage of patients on each regimen, stratified by adults and pediatrics
ADULTS	191	191 ÷ 376 × 100 = 50.8%	191 ÷ 376 × 100 = 51.1%
PEDIATRICS	2	2 ÷ 376 × 100 = 0.5%	2 ÷ 376 × 100 = 0.5%
Total patients	193	193 ÷ 376 × 100 = 51.3%	193 ÷ 376 × 100 = 51.3%

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3. Define the total number of patient-months or duration of therapy for each group.

Regimen	Months Therapy Reported Submitted in Month												Total No. of Patients	Estimated Average Dose per Month	Calculated Doses to be Supplied	Stocks Available (at Start)	Stocks Available (at End)	Months per Month
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec						
Adults	11	147	139										381	381	381	381	381	
Children													200	200	200	200	200	

Calculation of patient-months for current patients:
 10 months x 381 adult patients = 3,810 patient-months for current adult patients
 10 months x 200 pediatric patients = 200 patient-months for current pediatric patients

Calculation of patient-months for new patients:
 $\frac{39 \times 55}{2} = 1,072.5$ patient-months for new adult patients
 for (39 + 10 = 49) 390 new adult patients
 $\frac{20 \times 55}{2} = 550$ patient-months for new pediatric patients

Total adult patient-months for current and new patients = 3,810 + 2,145 = 5,955
 Total pediatric patient-months for current and new patients = 200 + 1,100 = 1,300

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Approach for ARV Quantification—
Final Steps

1. Sum total needs for each ARV product for each indication.
2. Subtract **usable** quantity in stock and on order.
3. Add an adjustment, if necessary.
4. Divide by quantity per purchase pack.
5. Multiply by price per pack.
6. Sum all costs.
7. Reconcile to budget, if necessary.
8. Review all steps and calculations.

Slide 34

4. Requirement = the % of patients on each regimen x quantity of medicines required per month x number of patient-months or duration.

Regimen	% of Patients on Each Regimen	Quantity of the product required if enough patients	Requirement for each ARV product
Adults 5,950	1st ZDV/3TC/ABC (60%)	3,570	3,570 units of ZDV/3TC/ABC
	2nd ZDV/3TC/ABC (15%)	892.5	892.5 units of ZDV/3TC/ABC
	3rd ZDV/3TC/ABC (10%)	595	595 units of ZDV/3TC/ABC
	4th ZDV/3TC/ABC (15%)	892.5	892.5 units of ZDV/3TC/ABC
200 new adult patients	1st ZDV/3TC/ABC (60%)	120	120 units of ZDV/3TC/ABC
	2nd ZDV/3TC/ABC (15%)	30	30 units of ZDV/3TC/ABC
	3rd ZDV/3TC/ABC (10%)	20	20 units of ZDV/3TC/ABC
	4th ZDV/3TC/ABC (15%)	30	30 units of ZDV/3TC/ABC
Pediatric 1,300	1st ZDV/3TC/ABC (60%)	780	780 units of ZDV/3TC/ABC
	2nd ZDV/3TC/ABC (15%)	195	195 units of ZDV/3TC/ABC
	3rd ZDV/3TC/ABC (10%)	130	130 units of ZDV/3TC/ABC
	4th ZDV/3TC/ABC (15%)	195	195 units of ZDV/3TC/ABC

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Quantification Tools (1)

- MSH RPM Plus
 - Quantification tool (facility level)
 - Simple; can be adapted for each country
 - Manual (workbook) and electronic (excel)
 - Quantimed
 - Access based tool
 - Program and national quantification
- JSI Deliver
 - Excel based tool

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5. Sum the total requirements for each ARV product across all groups.

Requirement for each ARV product	Total Requirements	Adjustments	Pack size	Total Packages
3,570 units of ZDV/3TC/ABC	3,570	0	60	59.5
892.5 units of ZDV/3TC/ABC	892.5	0	60	14.875
595 units of ZDV/3TC/ABC	595	0	60	9.916
892.5 units of ZDV/3TC/ABC	892.5	0	60	14.875
120 units of ZDV/3TC/ABC	120	0	60	2
30 units of ZDV/3TC/ABC	30	0	60	0.5
20 units of ZDV/3TC/ABC	20	0	60	0.333
30 units of ZDV/3TC/ABC	30	0	60	0.5
780 units of ZDV/3TC/ABC	780	0	60	13
195 units of ZDV/3TC/ABC	195	0	60	3.25
130 units of ZDV/3TC/ABC	130	0	60	2.166
195 units of ZDV/3TC/ABC	195	0	60	3.25
117,000 units of D4T (single)	117,000	4,176 x 12,960	2,000	58,500
14,880 units of 3TC (single)	14,880	0	100	148.8

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Quantification Tools (2)

- Clinton Foundation
 - Pediatric quantification tool
- WHO
 - Focamed (software)
 - WHO still field testing tool

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Data Collection: ARV Dispensing Tool



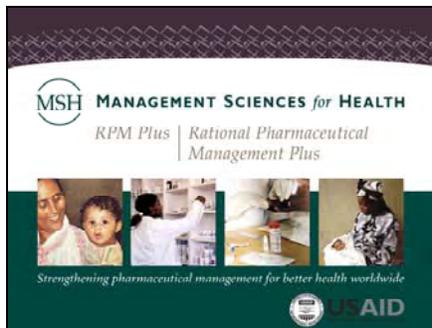
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ARV Dispensing Tool – RPM Plus

- Links patient information and individual ART history to stock movement in a facility
- Maintains records for each patient receiving ART - tracks patient profile and medication history
- Generates key management reports, such as Monthly Patient Uptake Trends and Currently Active Patients per Regimen
- Experiences
 - Cote d'Ivoire: 11 sites
 - Haiti: 4 sites
 - Kenya: 20+ sites
 - Namibia: 4 sites
 - Rwanda: 5 sites
 - Zambia: 17 sites

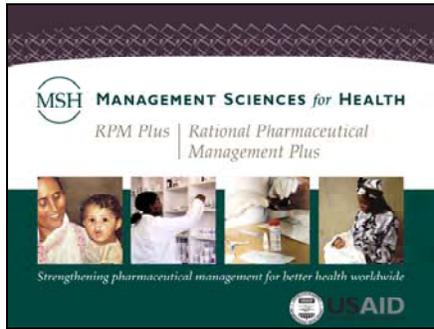
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ANNEX 4. PRESENTATIONS ON MEASUREING PERFORMANCE: INDICATORS



Slide 1



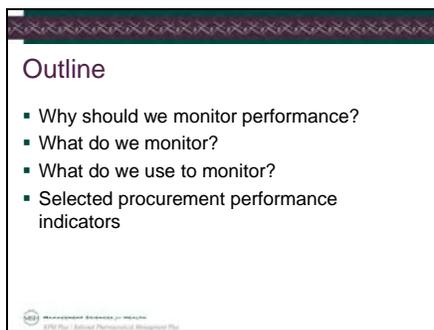
Slide 4



Slide 2



Slide 5



Slide 3



Slide 6

What Do We Use to Monitor?

Standardized, objective measurements (indicators) that are:

- **Clear** - easily understood by everyone
- **Useful** - reflect important dimension of performance
- **Measurable** -
 - quantitative: rates, ratios, percentages, common denominator (e.g. population)
 - qualitative: "yes", "no"
- **Reliable** - can be collected consistently by different data collectors
- **Valid** - true measure



Slide 7

Supplier Service

- Average lead time for supplier delivery for the most recent completed procurement cycle (a sample of orders, calculated separately for all suppliers, local manufacturers and foreign suppliers)



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Product Price

- Percentage of reference price* paid for last regular procurement of a set of indicators products

* Average international price (MSH International Drug Price Indicator Guide), previous tender prices, other comparison sources



Slide 8

Procurement Agency Performance

- Percentage by value of tracer medicines and supplies purchased through competitive bidding during the past year
- Average time for payment for the most recent complete procurement (calculated separately for all suppliers, local manufacturers and foreign suppliers)
- Percentage of drug products (batches) subjected to quality control testing compared with target percentage to be tested for the most recent complete procurement cycle



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Product Quality

- Percentage of drug products (batches) that failed quality control testing during the past year or complete procurement cycle
- Percentage of drug products (batches) that were rejected during the past year
 - all causes (failed to meet specifications, visually detected defects, failed quality control testing)



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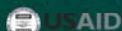


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