

Activity and Product Status Report

**Project Year 7,
Quarter 1
October -
December 2006**

Management Sciences for Health
is a nonprofit organization
strengthening health programs



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*A report on quarterly
progress achieved
towards activities,
products, and results*

January 2007

**Rational Pharmaceutical Management Plus Program
Activity and Product Status Report
October - December 2006**

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Rational Pharmaceutical Management Plus Program
Center for Pharmaceutical Management
Management Sciences for Health

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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MANAGEMENT SCIENCES *for* **HEALTH**

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ACRONYMS AND ABBREVIATIONS

AB	Africa Bureau
ACF	Allocable Cost Factor
ACTMalaria	Asian Collaborative Training Network for Malaria
AFR/SD/HRD	Bureau of Africa/Office of Sustainable Development [USAID]
AFRO	Regional Office for Africa [WHO]
AIDS	Acquired Immunodeficiency Syndrome
AMI	Amazon Malaria Initiative
AMR	Antimicrobial Resistance
AMTSL	Active Management of the Third Stage of Labor
ANE	Asia and Near East [Bureau, USAID]
APUA	Alliance for the Prudent Use of Antibiotics
ARCH	Applied Research for Child Health [Project]
ART	Anti-Retroviral Treatment
ARV	Anti-Retrovirals
BASICS	Basic Support for Institutionalizing Child Survival [Project]
BASICS II	Basic Support for Institutionalizing Child Survival II [Project]
BGH	USAID Bureau of Global Health
C-DMCI	Community Level Drug Management for Childhood Illness
C-IMCI	Community – Integrated Management of Childhood Illness
CDC	U.S. Centers for Disease Control and Prevention
CPG	Clinical Practice Guidelines
CNM	National Malaria Center
CPM	Center for Pharmaceutical Management
CRHC	Commonwealth Regional Health Community
CRHCS	Commonwealth Regional Health Community Secretariat
CTT	Commodity Tracking Tool
DFID	Department for International Development [U.K.]
DILSAT	District Integrated Logistics Self-Assessment Tool
DMCI	Drug Management for Childhood Illness
DMIS	Drug Management Information System
DMTB	Drug Management for Tuberculosis
DR	Dominican Republic
DQI	Drug Quality and Information
DTC	Drug and Therapeutics Committee
ECSA	East, Central and Southern Africa
E&E	Europe and Eurasia [Bureau, USAID]
EDM	See WHO/EDM
E&E/EEST/HRHA	Bureau for Europe and Eurasia, Office of Environment, Energy and Social Transition, Health Reform and Humanitarian Assistance Division (USAID)
FHI	Family Health International
FHI/IMPACT	FHI/Implementing AIDS Prevention and Care [Project]
FPLM	Family Planning Logistics Management [Project]
FY	Fiscal Year
GDF	Global Drug Facility
GFATM	Global Fund for AIDS, Tuberculosis and Malaria

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GTZ	Deutsche Gesellschaft für Technische Zusammenarbeit (German Technical Cooperation Agency)
IC	Infection Control
ICIUM	International Conference on Improving Use of Medicines
IMCI	Integrated Management of Childhood Illness
INRUD	International Network for Rational Use of Drugs
IPT	Intermittent Preventive Treatment
IT	Information Technology
IUATLD	International Union Against Tuberculosis and Lung Disease
JSI	John Snow, Incorporated
KEMSA	Kenya Medical Supplies Agency
KfW	German Development Bank (German acronym)
KNCV	Royal Netherlands Tuberculosis Association (Dutch acronym)
LAC	Latin America and the Caribbean
MAC	Malaria Action Coalition
MCH	Maternal and Child Health
MEDS	Missions Essential Drugs Store
MIM	Multilateral Initiative on Malaria
MNH	Maternal and Neonatal Health [Project]
MOH	Ministry of Health
MOU	Memorandum of Understanding
MSD	Medicines Stores Department
MSH	Management Sciences for Health
NACC	National Antibiotic Coordinating Committee [Nepal]
NFHP	National Family Health Program
NGO	Non-Governmental Organization
NIS	Newly Independent States
NMCC	National Malaria Control Center
NMCP	National Malaria Control Program
NMS	National Medical Stores
NTP	National TB Program
OECS	Organization of Eastern Caribbean States
OHA	Office of HIV/AIDS Services (USAID)
PAHO	Pan American Health Organization
PEPFAR	President's Emergency Plan For AIDS Relief
PHC	primary health care
PHN	Population, Health and Nutrition [Center for, USAID]
PMI	President's Malaria Initiative
PMTCT	Prevention of Mother –to-Child Transmission]
PPH	Post Partum Hemorrhage
PRDU	Promoting Rational Drug Use
PY	Project Year
QA	Quality Assurance
RBM	Roll Back Malaria
REDSO	Regional Economic Development Support Office [USAID]
RPM	Rational Pharmaceutical Management [Project]
RPM Plus	Rational Pharmaceutical Management Plus [Program]
SEAM	Strategies for Enhancing Access to Medicines [Program]
SO	Strategic Objective [USAID]
SOPs	Standard Operational Procedures
S/P	Sulfadoxine/Pyrimethamine

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SSO	Strategic Support Objective
STGs	Standard Treatment Guidelines
STI	Sexually Transmitted Infection
TA	Technical Assistance
TB	Tuberculosis
TBCTA	USAID TB Coalition for Technical Assistance
TOT	Training-of-Trainers
UK	United Kingdom
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	U.S. Agency for International Development
USAID/G/PHN	U.S. Agency for International Development/Global Bureau Center for Population Health and Nutrition
USP	United States Pharmacopeia
VCT	Voluntary HIV/AIDS Counseling and Testing [USAID initiative]
WHO	World Health Organization

NARRATIVES - GLOBAL PROGRAMS

SO2: MATERNAL HEALTH AND NUTRITION

Overview

RPM Plus continues to provide technical assistance to the Prevention of Post-Partum Hemorrhage Initiative (POPPHI) in drug and supply management issues that might hinder active management of the third stage of labor (AMTSL) to prevent PPH. POPPHI is a consortium of partners comprised of PATH, RTI International, EngenderHealth, the International Confederation of Midwives (ICM) and the International Federation of Gynecology and Obstetrics (FIGO). Supporting partners include RPM Plus, HealthTech, and JHPIEGO's Access to Clinical and Community Maternal, Neonatal and Women's Health Services (ACCESS). These partners work together at the policy and program levels to both support interventions through expanded use of Active Management of the Third Stage of Labor (AMTSL) and to develop structures that sustain the continued emphasis on the practice over the long term.

In particular, RPM Plus will be focusing on West Africa. Some countries in W. Africa namely Ghana, Senegal, Burkina Faso, Benin and Mali have introduced and expanded the use of AMSTL. Others have recently begun expanding use with support from earlier USAID-funded activities. Major hurdles related to the range of drugs, their availability and routes of administration exist to prevent AMSTL from becoming a universally available intervention. RPM Plus is supporting the expansion of means to make AMTSL more widely available through addressing some of these hurdles.

RPM Plus activities under USAID/G/PHN SO2 focus on three main technical objectives:

Objective 1: Through strategic partnerships with and technical leadership to USAID and USAID-supported CAs working in maternal health, improve maternal health program planning and service delivery with respect to drug and commodity management issues.

Objective 2: Enhance the capacity of government and non-governmental organizations to manage drugs and supplies for key maternal health services.

Objective 3: Improve capacity and awareness of global maternal health initiatives and partners in addressing Maternal Health pharmaceutical and supply management issues.

Major activities this quarter

RPM Plus *Review of Policies and Procedures on Use of Uterotonics for the Active Management of the Third Stage of Labor (AMTSL) and the Prevention of Post Partum Hemorrhage in Four West Africa Countries: Benin, Burkina Faso, Cameroon, and Mali* was finalized in English and French and distributed to USAID Missions and Ministries of Health. The study was also

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presented in November at the *XVIII FIGO World Congress of Gynecology and Obstetrics* in Kuala Lumpur, Malaysia.

RPM Plus submitted an abstract for the 2006 SAGO (African Association of Obstetricians and Gynecologists) conference proposed for December 2006 in Kinshasa, DRC. Unfortunately the conference has been postponed.

In collaboration with AWARE-RH and as a follow-on to the Dakar Quantification Workshop for francophone W. Africa held in August 2006, RPM Plus conducted a Quantification Workshop in Accra, Ghana for procurement personnel from countries in Anglophone W. Africa. The training included sessions on the quantification of ARVs, anti-malarials and uterotonics as well as an introduction to Quantimed. Participants were introduced to AMTSL and the issues and challenges related to quantifying uterotonics not only for prevention of post partum hemorrhage (PPH) but also other indications such as induction of labor and the treatment of PPH.

While in Ghana, RPM Plus met with Ghana Health Services (GHS), USAID and partners to prepare for POPPHI AMTSL Study in Ghana. Data Collection for POPPHI Study of current AMTSL practices in Benin was completed in November. RPM Plus consultant attended data analysis workshop in mid-December in Baltimore.

RPM Plus participated in *Reproductive Health Procurement ToolKit* Development meeting hosted by PATH/DC, December 5th, 2006 and also attended the Uterotonic Drugs and Devices (UDD) Task Force Meeting, Dec 15, 2006.

SO3: CHILD SURVIVAL

Overview

In many developing countries, child mortality remains unacceptably high. Childhood diseases such as malaria, diarrheal diseases, acute respiratory infections, measles, and malnutrition, in addition to HIV/AIDS, contribute substantially to infant and child mortality. In response to the high mortality caused by these main childhood illnesses, the Integrated Management of Childhood Illness (IMCI) strategy, developed jointly by WHO and the United Nations Children's Fund (UNICEF), has been implemented in numerous countries to offer program managers and service providers an integrated approach to effectively manage childhood illness. Notwithstanding considerable efforts to make essential IMCI drugs and other commodities available, significant gaps and management problems persist at various levels of the health system in many developing countries.

RPM Plus child survival activities funded under SO3 are complementary to USAID/Africa Bureau child survival interventions and both sets of activities support SSO3 and corresponding intermediate results. The activities are conducted through synergistic funding to produce greater impact and the two workplans share the same technical objectives.

RPM Plus activities under USAID/G/PHN SO3, "increased use of key child health and nutrition interventions," focus on four main technical objectives during year 4 (FY03):

1. To enable decision makers, managers, and service providers to identify and monitor strengths and weakness in drug management for child health through the use of tools targeting public and private providers and caregivers
2. To increase the capacity of decision makers and service providers to design and apply appropriate interventions to improve availability and use of child health drugs in the public sector
3. To increase access to and use of child health drugs through initiatives involving the private sector.
4. To contribute toward shaping global child health strategy to include drug management through collaboration with international bodies and other organizations

Through its Strategic Objective 3, USAID supports interventions and activities to address child survival problems. In response to the USAID initiatives, RPM Plus has established a strong working relationship with groups and organizations to develop activities aimed at improving the

IMCI drug management system in countries of interventions. IMCI is implemented as a comprehensive strategy including preventive and curative interventions to ensure high quality of care to sick children and to facilitate behavior changes of caregivers for children. However, the supply and management of essential drugs and vaccines have been identified as critical pieces to allow an effective management of childhood illness. In many countries, the lack or absence of essential drugs and resources for IMCI is a constant impediment. In other countries, essential drugs are poorly managed if they exist at all, and treatment decisions and behaviors are not rational. Moreover, limitation to access IMCI services is often coupled with weakness of the pharmaceutical systems, where service providers and managers are poorly trained, resulting in ineffective drug and commodity management practices. These issues—both in the public and private sector and at household level—are a focus for RPM Plus activities in the child survival portfolio, as well as advocating for pharmaceutical management being part of global, regional and national child survival agendas.

Major Activities in this Quarter

During this quarter, RPM Plus advanced private sector initiatives in several countries. In Tanzania, work continued with the implementation of the child health component of the accredited drug dispensing outlet (ADDO) program. The draft reports for the baseline quantitative and formative research for the child health component of the ADDO program were submitted by the Centre for Enhancement of Effective Malaria Interventions (CEEMI) and contents were reviewed by BASICS and RPM Plus. In preparation for regional training sessions, a three day Training-of-Trainers was held to form 22 trainers (5 from the national level, 2 from the regional level and 15 from the district level). A total of 302 ADDO dispensers were trained in November in child health in the 5 districts of the Ruvuma region. Follow up visits were conducted with recently trained ADDO dispensers to evaluate skills learned and changed practices. To support these activities, Grace Adeya from RPM Plus traveled to Tanzania (Oct 31 – Nov 11, 2006) and provided technical support in the coordination and implementation of the ADDO child health trainings.

In Rwanda, the home-based management of malaria (HMM) assessment was completed in collaboration with BASICS and the national malaria program. Jane Briggs and Katie Senauer of RPM Plus traveled to Rwanda (Oct 26 – Nov 11, 2006) to conduct the pharmaceutical management and private sector components of the HMM assessment. A three day training was held to form 16 data collectors and field-test data collection instruments. Data was collected from five districts (which included 5 district pharmacies, 21 health centers, 29 community health workers, 5 dispensaries, 21 comptoir pharmaceutiques, and 23 simulated purchases). A preliminary presentation was given to the national malaria program and other stakeholders in-country to present initial results and recommendations before a formal final presentation in January 2007. A draft of the final assessment report was completed with partners and submitted to the national malaria program for review.

In DRC, community case management (CCM) activities advanced. The results of the baseline C-DMCI survey report were disseminated during a three day workshop in Kinshasa (27-29 Dec, 2006) where participants discussed recommendations, implications and next steps. Participants

included key stakeholders and representatives from the Ministry of Health, WHO, UNICEF, BASICS and local NGOs. The final baseline C-DMCI report was completed and submitted to editing.

In addition to CCM activities in DRC, RPM Plus provided technical support in the national roll out of zinc treatment as part of the management of diarrhea. RPM Plus participated during three zinc meetings (Nov 9th, Nov 24th and Dec 14th, 2006) with other interested partners including WHO, AXxes (the bilateral), BASICS, Ministry of Health and Helen Keller International. RPM Plus will provide technical assistance for aspects of national roll-out of zinc treatment specifically related to pharmaceutical management, including the review of materials and assessment tools.

In Madagascar, RPM Plus continued discussions with the USAID Mission regarding potential child health activities. Based on these discussions, a child health component will be integrated into an assessment to analyze and determine the current availability of pharmaceutical products used for the management of malaria and subsequent development of a national procurement and distribution plan for the next two years (funded through MAC). The assessment will occur next quarter.

SO4: HIV/AIDS

Overview

The availability of pharmaceutical drugs and commodities is an essential component of HIV/AIDS health strategies in developing countries. However, the vast majority of people living with HIV/AIDS in developing countries do not have access to the pharmaceutical products that could prolong and improve their lives. Improving access to HIV/AIDS-related pharmaceutical products presents many challenges, including those that are directly related to pharmaceutical commodity management. RPM Plus activities under USAID/G/PHN SSO4, “increased use of improved, effective and sustainable responses to reduce HIV transmission and mitigate the impact of the HIV/AIDS pandemic,” focus on four main technical objectives:

1. To increase the capacity of USAID and USAID-funded cooperating agencies (CAs) to procure quality drugs and commodities for HIV/AIDS programs and provide assistance in addressing contextual issues
2. To increase the capacity of USAID and USAID-funded CAs to identify, prioritize and address commodity management issues to support the introduction or scaling up of HIV/AIDS programs and services
3. To provide technical leadership to USAID to identify key issues, form strategic partnerships and to develop and support approaches and initiatives to address HIV/AIDS-related commodity management issues at global and regional levels
4. To increase the capacity of national governments and the private sector to identify, prioritize and address commodity management issues to improve access to and use of quality drugs and commodities for HIV/AIDS programs

Major activities this quarter

During this quarter, the HIV test kits listed in the USAID Source and Origin Waiver – Procurement Information Document was updated with technical and procurement information for the HIV test kits. A meeting was held with USAID in order to go over the process and underline the requirements of the document. Discussions commenced with the web team at MSH to develop CD versions of the information document and also to update the web version.

The HIV/AIDS pharmaceutical management training materials manual was updated during this quarter. This update involved a revision of the power point presentations in the training materials manual to ensure that these were in line with the new WHO guidelines issued in August 2006. In addition, the pre- and post- field testing questions for the Belize activity were revised and updated.

Although no progress was reported during this quarter for the finalization and dissemination of the laboratory training materials, it is expected that these materials will be pilot-tested in Kenya during the next quarter.

During this quarter, work continued on the adherence activity, the first draft of the adherence promotion planning tool adapted from the motivations mapping tool developed for TB treatment

programs was finalized and reviewed. Suggestions for the modifications will be implemented during the next quarter.

In October 2006, MSH/RPM Plus gave a small grant to Makerere University, Uganda to evaluate the impact of using the MTP approach for HIV/AIDS pharmaceutical management training in selected facilities in Uganda, Kenya and Tanzania. Facilities were selected for MTP evaluation in Uganda while an MTP implementation workshop was conducted in November/December in Kenya. An MTP implementation workshop is planned for Tanzania.

As part of the activity to review and develop a paper for HIV/TB integration, during this quarter, Phase 2 studies from Malawi and Ethiopia were received and the analysis for Ethiopia was completed. The writing of the case study and the country report for Ethiopia is still on-going, while the draft summary case study reports for Uganda, Tanzania and Kenya have been completed. Work on the analysis of Phase 2 findings for Malawi also began during this quarter.

SO5: ANTIMICROBIAL RESISTANCE

Overview

The problem of antimicrobial Resistance (AMR) is severely threatening our ability to treat infections. AMR is a serious, complex health-care problem occurring worldwide and is dramatically increasing. Resistance makes infections more difficult to treat, raises levels of morbidity/mortality, and increases health-care costs. So, a concerted global action is required to combat this problem in an effective and timely manner.

Under USAID results framework (BGH SS05 – increased use of effective interventions to reduce the threat of infectious diseases of major public health importance), RPM Plus is currently working on several activities towards addressing AMR problems in developing countries. The following is a brief narrative of the progress made on these activities in FY06-PY7 Q1.

Major Activities this Quarter

The AMR Task Force for country-level AMR advocacy and containment in Ethiopia made a key achievement by holding a 3-day AMR Call-To-Action Workshop in November that was attended by 65 players. RPM Plus, APUA and Links Midia collaborated with the in-country partners to develop and conduct this workshop. A significant output of the workshop was a call-to-action declaration—called Adama Declaration—that pledged the commitment of MOH, DACA and other stakeholders to address AMR. RPM Plus also assisted the Voice of America (VOA) in developing and broadcasting of three AMR related interviews in conjunction with the AMR Call-To-Action Workshop in Ethiopia.

During this quarter, an oral paper on the South African ART Adherence work was presented as a part of an AMR-dedicated session during the APHA Annual Meeting held in November. The title of the presentation was "Development of a Multimethod Medication Adherence Assessment Tool Suitable for Antiretroviral Therapy Facilities in Resource-Constrained Settings."

SOPs developed by RPM Plus to assist the Zambia Pharmaceutical Regulatory Authority (PRA) in training port of entry inspectors on i) document verification ii) physical/visual inspection (packaging/labeling) and iii) product testing using Minilab kits has been finalized and approved by PRA/MOH of Zambia to be used in the training, planned for January 2007.

RPM Plus and TFDA developed a pilot plan to restructure the reporting system of the Minilab Zonal Center. Following up the AMR/malaria jointly held 2-day consultative meeting on pharmacovigilance (PV) in July 2006. RPM Plus finished a draft implementation guide "Getting Pharmacovigilance Off the Ground." This document concentrates on practical operational and coordination issues necessary to set up a PV system. R

PM Plus has also developed a workplan to improve the adverse drug reaction (ADR) reporting system in two pilot districts in Tanzania. RPM Plus (AMR/malaria) and USP DQI co-organized a regional consultative workshop in Dar es Salaam in November to discuss the quality of

antimalarials. The goal of the workshop was to establish a framework for regional collaboration in quality assurance and related issues.

The infection control self-assessment tool with 21 modules and the accompanying users' manual were edited and finalized in RPM Plus format. These tools were disseminated to partners in Swaziland in preparation for the planned infection control workshop there at the end of January 2007.

SO5: TUBERCULOSIS

Overview

Even with joint efforts of many international organizations such as those in the Stop TB partnership, control of Tuberculosis (TB), endemic in many countries worldwide, needs much more support. National TB programs are learning mechanisms to improve case detection, how different treatment regimens such as fixed-dose combination products and patient kits can improve patient and prescriber compliance, and importance of case management monitoring and reporting. However, this has become complicated when the number of cases increases due to changes in population migration and number of patients co-infected with HIV/AIDS.

Since 2000, RPM Plus has worked to bring the issues of pharmaceutical management for TB to national agendas. Through international organizations like the Stop TB working groups RPM Plus contributed to the Global Plan to Stop TB for 2006 – 2015. The most significant achievement for RPM Plus with USAID/BGH funding to date has been providing ongoing technical leadership and assistance to the GDF/GLC. RPM Plus activities with the GDF/GLC increase the availability and access to DOTS in priority countries thus contributing to DOTS expansion and strengthening. The development of human capacity in TB commodity management has also been a focus of RPM Plus work. The demand in RPM Plus training from NTPs and WHO regional offices currently exceeds RPM Plus capacity and available funding. The tools and methodologies developed by RPM Plus are available to country programs and NTPs through the RPM Plus website and dissemination of documents during international TB meeting such as IUATLD World Congress.

RPM Plus has identified three technical objectives which are key to meeting the challenge of strengthening local TB drug management capacity:

1. Objective 1: Improve capacity and awareness of TB global initiatives and partners in managing pharmaceuticals for TB programs
2. Objective 2: Increase the human capacity of TB programs to design, apply, and monitor appropriate interventions to ensure uninterrupted supply of quality TB commodities for expanding DOTS programs
3. Objective 3: Increase the evidence base for improvements in TB commodity management

Key activities under this quarter:

Provide technical leadership to WHO TB Working Groups and Stop TB partners

In April 2006, the Stop TB Coordinating Board during a meeting in Abuja, Nigeria endorsed the terms of reference for the task force, which is made up of designates from six of the working groups, on retooling. During this quarter, the retooling paper, *New Technologies for TB Control: A Guide for their Adoption, Introduction and Implementation*, was completed and approved by the Stop Tb Task Force at the 11th Stop TB partnership coordinating meeting.

Provide assistance to GLC in expediting response to DOTS Plus projects

MSH RPM Plus and GLC are working on the final draft of a report of the Global Market Survey of 2nd line TB Medicines.

Increase human capacity of StopTB Partners in pharmaceutical management for TB

A nine day regional training on *Tuberculosis Control Program Management* for senior staff working in TB control in Central and Eastern Europe and newly independent states was held from November 13-21, 2006 at the National Tuberculosis and Lung Diseases Research Institute in Warsaw, Poland. The RPM Plus TB program manager facilitated the *Management of TB Drugs and Supplies* course in which 26 participants attended. The training aims at improving management skills in program planning, training, logistics, laboratory support, recording and reporting and provides trainees with ample opportunities to reflect and plan for the challenges they are facing.

Develop a guidance document on effective commodity management to compliment WHO TB/HIV guidelines

RPM Plus has completed phase two study in Ethiopia and Malawi, while the review and analysis of study reports in the two countries are ongoing. Final report write up for Ethiopia has begun. Draft summary case study reports for Uganda, Tanzania and Kenya have been completed. RPM Plus has commenced the process of information verification with stakeholders in these 3 countries after which case studies can be finalized.

Disseminate RPM Plus Pharmaceutical Management for TB tools and maintain website

The RPM Plus TB website is updated on a regular basis, while TB tools such as the *Pharmaceutical Management for TB Assessment Manual* and the *Managing Pharmaceutical and Commodities for Tuberculosis Guide* continue to be in demand and were distributed during the 37th IUATLD Congress held in Paris, France, October 31-November 5, 2006. Furthermore, two-page flyers on various TB activities and tools have been finalized.

Formulate and disseminate global policy recommendations for use of Incentives and Enablers in TB control

During this quarter, RPM Plus completed the final draft of the RPM Plus report, "Evaluating Tuberculosis Incentives and Enablers in the Context of Scale-up: Evidence and Experiences". RPM Plus also revised the operations research and evaluation (OR&E) guide to better support NTPs in evidence-based decision-making regarding I&E. A 2-page briefing document summarizing this 4-year operations research activity of RPM Plus was developed.

Provide technical leadership to the GDF and GLC in expediting response to DOTS and strengthening and addressing MDR/XDR TB

The RPM Plus TB program manager provided technical leadership for monitoring forms and checklists from various countries regarding pediatric formulations during the Technical Review Committee meeting held at the Global Drug Facility in Geneva, November 13-16, 2006.

Provide technical leadership to WHO, StopTB Working Groups and partners, and other global initiatives to ensure that pharmaceutical management considerations are addressed in their efforts

MSH RPM Plus in collaboration with the GDF held a one day workshop titled *Building capacity in pharmaceutical management for TB, MDR-TB and TB/HIV* at the 37th International Union Against TB and Lung Disease in Paris, France on November 1, 2006. A total of 71 participants from various parts of the world such as Afghanistan, India, Philippines, Romania, Japan, Kenya, Uzbekistan, Kazakhstan, Turkey and South Africa attended the workshop.

COMMON AGENDA

Overview

USAID staff and RPM Plus developed a list of topics that were considered both vital and difficult to classify within a particular Strategic Objective (SO). The varied activities within the common agenda portfolio have continued to play an anchor role for RPM Plus. The Common Agenda is intended to identify (and provide funding for) overarching health commodity issues that RPM Plus should address.

Overall objectives for the Common Agenda topics include:

1. Improve availability and use of health commodities
2. Increase and/or leverage resources for health commodities with donors, foundations, the World Bank, and selected NGOs
3. Develop increased drug management capacity to improve health system performance
4. Provide technical leadership and support in drug management to global initiatives and BGH programs
5. Conduct joint country assessments of commodity management with DELIVER and other contractors, as appropriate
6. Promote the development of a global research agenda for drug management and drug use practices
7. Develop RPM Plus distance learning tools

Major activities this quarter

In October 2006, MSH/RPM Plus gave a small grant to Makerere University in Uganda to evaluate the impact of using the MTP approach for HIV/AIDS pharmaceutical management training in selected facilities in Uganda, Kenya and Tanzania. In Uganda and Tanzania twelve facilities were selected for MTP evaluation, while in Kenya ten facilities were selected. In Kenya the MTP implementation workshop was conducted on the 30th of November and the 1st of December, 2006 while in Uganda the workshop ran from the 7th to the 8th of December 2006. In Tanzania the MTP implementation workshop is yet to be conducted. The workshop proceedings included; introducing and describing the MTP approach, clarifying the objectives of the activity, presenting and discussing the problems identified during the comprehensive assessments of the HIV/AIDS pharmaceutical management systems, prioritizing problem areas for interventions, developing local plans to address priority problem areas, and discussing indicators of progress specific to the problems to be addressed. During the workshop, three key problem areas which were cross cutting were prioritized for solving.

The workshop will be followed by three 6-weekly MTP sessions. The aim of the sessions will be in three parts; (1) Monitoring progress. This would include, reporting on activities, analyzing

data collected for the session, evaluating progress, and documenting progress. (2) Training/ Skills building. This would include; reviewing content and process required for next problem area, facilitating skills building/ problem solving activities for the next priority area, and documenting progress. (3) Planning. This would include; developing goals and tasks for the next activity, discussing indicators and data collection requirements, and documenting progress.

MAINSTREAMING INITIATIVE

Overview

The Health System Strengthening Mainstreaming Initiative was kicked off in 2004. The purpose of the Mainstreaming Initiative is to identify cost-effective ways to put the combined knowledge, expertise and tools from USAID's health system strengthening projects at the service of USAID's large bilateral health service delivery projects and to improve the capacity of these projects to achieve USAID's health impact objectives. The need for this initiative came from the observation that in many cases PHN officers are ill-equipped to identify and address systems issues that could impact on their efforts, and that many bilateral programs have not been availing themselves of existing proven tools and methods. In this way, the Mainstreaming Initiative represents an effort to systematize the lessons from these past experiences that have applicability at the service delivery level and identifies enhancing health system capacities as a core programmatic objective.

Major activities this quarter

RPM Plus visited Azerbaijan in November to work with the CIS drug quality laboratory in Azerbaijan. This activity was based on recommendations made earlier in the year from the initial scoping mission. The main objective of the visit was to initiate work on improving laboratory procedures and operations. This included evaluating the current drug quality laboratory procedures and equipment, identifying gaps in skills and suggesting interventions for strengthening. It also included identifying gaps in laboratory procedures, advising on the content of Standard Operating Procedures that may be required for the laboratory to perform its functions. USP/DQI also has Mainstreaming funds to work in Azerbaijan and RPM Plus will coordinate future activities with them and with the Mission. In addition, USP and MSH have been asked to submit proposals for related training activities to the START program in Azerbaijan.

NARRATIVES – REGIONAL PROGRAMS

AFRICA BUREAU: CHILD SURVIVAL

Overview

In many developing countries, child mortality remains unacceptably high. Childhood diseases such as malaria, diarrheal diseases, acute respiratory infections, measles, and malnutrition, in addition to HIV/AIDS, contribute substantially to infant and child mortality. In response to the high mortality caused by these main childhood illnesses, the Integrated Management of Childhood Illness (IMCI) strategy, developed jointly by WHO and the United Nations Children’s Fund (UNICEF), has been implemented in numerous countries to offer program managers and service providers an integrated approach to effectively manage childhood illness. Notwithstanding considerable efforts to make essential IMCI drugs and other commodities available, significant gaps and management problems persist at various levels of the health system in many developing countries.

RPM Plus child survival activities funded under USAID/Africa Bureau child survival are complementary to SSO3 interventions and both sets of activities support SO3 and corresponding intermediate results. The activities are conducted through synergistic funding to produce greater impact and the two workplans share the same technical objectives.

- To enable decision makers, managers, and service providers to identify and monitor strengths and weakness in drug management for child health through the use of tools targeting public and private providers and caregivers
- To increase the capacity of decision makers and service providers to design and apply appropriate interventions to improve availability and use of child health drugs in the public sector
- To increase access to and use of child health drugs through initiatives involving the private sector.
- To contribute toward shaping global child health strategy to include drug management through collaboration with international bodies and other organizations

RPM Plus has established a strong working relationship with groups and organizations to develop activities aimed at improving the IMCI drug management system in countries of interventions. IMCI is implemented as a comprehensive strategy including preventive and curative interventions to ensure high quality of care to sick children and to facilitate behavior changes of caregivers for children. However, the supply and management of essential drugs and vaccines have been identified as critical pieces to allow an effective

management of childhood illness. In many countries, the lack or absence of essential drugs and resources for IMCI is a constant impediment. In other countries, essential drugs are poorly managed if they exist at all, and treatment decisions and behaviors are not rational. Moreover, limitation to access IMCI services is often coupled with weakness of the pharmaceutical systems, where service providers and managers are poorly trained, resulting in ineffective drug and commodity management practices. These issues—both in the public and private sector and at household level—are a focus for RPM Plus activities in the child survival portfolio, as well as advocating for pharmaceutical management being part of global, regional and national child survival agendas.

Major Activities in this Quarter

This quarter, RPM Plus continued collaboration with WHO AFRO to incorporate a pharmaceutical management component into the Integrated Management for Childhood Illnesses (IMCI) facility survey. In Kenya, a local consultant was hired to oversee the pharmaceutical management component of the IMCI facility survey. The consultant participated in the training and supervision of data collection throughout survey implementation. The survey was completed and a report was drafted for integration into the final IMCI facility survey report. Data was analyzed by the consultant, with RPM Plus review, using the draft of the standard data entry and analysis sheet designed for in country use. The analysis sheets were revised in accordance to feedback received through its use in the Kenya data analysis and a final version of the generic analysis spreadsheets will be completed next quarter.

In Senegal, RPM Plus participated with partners including the Ministry of Health and the World Health Organization to disseminate IMCI facility survey results, which included a pharmaceutical management component, at the regional and district level. At the national level, the survey results were presented at a workshop for the Partnership for Maternal, Newborn and Child Health (PMNCH) where feedback was given on the draft final report. The feedback will be incorporated into the final report before publication.

ASIA AND THE NEAR EAST

Overview

RPM Plus has been providing technical assistance in pharmaceutical management of malaria, TB, HIV/AIDS, and child survival in the ANE region since 2000. This technical assistance has included identifying problematic household and providers behaviors in the diagnosis and treatment of malaria, strengthening TB pharmaceutical management in China, and addressing issues in pharmaceutical management of HIV/AIDS.

Whereas in years 2002-2005, much of the emphasis was on developing appropriate methodologies to gather information, RPM Plus efforts are now focused on assisting counterparts to utilize this information to guide decision-making in malaria program management, and to critically evaluate implementation of ACT drug policy. RPM Plus technical assistance will complement efforts undertaken under the Global Fund and focus on hot spots of antimicrobial resistance.

In late 2004, the National Center for Tuberculosis Control and Prevention (NCTB) in China initiated a program of activities to strengthen TB drug management in collaboration with WHO Beijing and RPM Plus of Management Sciences for Health. In 2006, new standard operating procedures (SOPs) and a training program to improve TB pharmaceutical management were developed and implemented at provincial, prefecture, and county levels in Henan Province, China. In addition, RPM Plus provided general training on TB drug management to pilot facility staff. Based on feedback received from participants, SOPs manuals were refined to make them more effective and user friendly. The introduction of new systems was supervised by NCTB officers based in Henan province and Beijing.

As countries in Southeast Asia and the Pacific embark on HIV/AIDS treatment and care programs, it is clear that effective management of HIV/AIDS medicines, including antiretroviral drugs (ARVs), and related commodities remain huge hurdles and constraints to maximizing the number of patients treated. There is also a keen need to coordinate pharmaceutical management of HIV/AIDS medicines and other commodities, regardless of their source, given global initiatives, such as PEPFAR and GFATM. RPM Plus will collaborate with WHO/WPRO to conduct a regional workshop on quantification, and identify countries that would benefit from follow up technical assistance.

Objective 1: Strengthen the capacity of regional, national, country and local decision makers to systematically identify, prioritize and monitor pharmaceutical problems that promote the emergence of antimicrobial resistance

Objective 2: Enhance the capacity of governmental and NGO counterparts to utilize indicator-based information to guide the development and implementation of drug management systems strengthening strategies

Objective 3: Expand the evidence base for developing and implementing effective drug interventions in commodity management for infectious diseases

Objective 4: Increase the capacity of USAID, governmental or NGO counterparts to maximize the efficient and effective use of resources for HIV/AIDS-related health commodities in support of an expanded response to the HIV/AIDS pandemic

Major Activities this Quarter

In October 2006, RPM Plus participated in the WHO Malaria Managers Meeting in Manila, Philippines, co-facilitating sessions on drug use practices, and public private mix in malaria. In November 2006, RPM Plus participated in a USAID Mekong Malaria Review Workshop in Chiang Mai, Thailand to provide an update on malaria pharmaceutical management activities to-date and discuss a new malaria strategy for the region. RPM Plus also met with RDM/A in Bangkok to discuss RPM Plus activities in TB and HIV/AIDS. After the workshop on HIV/AIDS pharmaceutical management in December, RPM Plus will follow up with countries that may be in need of additional technical assistance, as discussed with the Mission. RPM Plus also met with the Regional Alliance Builder to learn more about the potential for engaging the private sector to improve pharmaceutical management.

RPM Plus conducted a pharmaceutical management in malaria workshop in December 2006 in Phnom Penh, Cambodia. Participants included 34 officials from district, provincial and central levels, as well as key MOH staff from the procurement and planning units, central medical stores and the national laboratory. In addition to other aspects of pharmaceutical management, special attention was paid to monitoring systems to improve the performance of the malaria pharmaceutical management system and evaluate the effect of interventions. Field visits were organized to challenge participants to think critically about the performance of pharmaceutical management systems and the data that can be collected to guide decision-making. Representatives of the United States Pharmacopeia Drug Quality & Information (USPDQI) program, the Pharmacists Association of Cambodia (PAC) and PSI also presented on relevant topics.

Seven pilot facilities in Henan developed a set of indicators as per newly developed Standard Operating Procedure (SOP) Manuals. These indicators are being reviewed with a view to providing feedback on drug management functions to senior NCTB Beijing staff and personnel at the pilot facilities responsible for TB drugs. The next visit to China is expected to take place at the end of January 2007 for a period of 2 weeks. RPM Plus staff prepared a draft article describing the methodology, results and experience of conducting the Pharmaceutical Management for Tuberculosis (PMTB) survey in Henan province.

RPM Plus met with stakeholders in Cambodia including the World Bank, Ministry of Health—Department of Drug and Food (DDF) and IMCI, PSI, PATH, Pharmacy

Association of Cambodia (PAC) and the Clinton Foundation to ascertain current program interventions and future possibilities for collaboration to engage the private sector. RPM Plus discussed adopting a performance-based network approach with representatives from DDF and PAC. The idea was well received and would also provide an opportunity to recruit, train and license a new cadre of pharmacists following the phasing out of Depot B type pharmacies. The mission suggested that DDF and PAC use existing channels to continue these discussions with other key MOH staff.

In December 2006, an RPM Plus team from Arlington and Vietnam offices organized and facilitated a joint regional workshop in Manila, Philippines with WHO/WPRO on forecasting, stock management, monitoring, and reporting on HIV commodities. The workshop participants included representatives from HIV/AIDS programs of nine countries: Cambodia, China, Fiji, Kiribati, Lao PDR, Papua New Guinea, Philippines, Tuvalu and Vietnam. The workshop focused on key factors and assumptions crucial to forecasting and quantification and provided practical tools to assist the decision-making process.

EAST AFRICA REGION

Over view

Since 2000, USAID/REDSO and the Bureau for Africa, Office of Sustainable Development (AFR/SD/HRD) have funded the Rational Pharmaceutical Management Plus (RPM Plus) program to support their strategic objectives (SO) in health in the ECSA region. In particular, SO7 – “Enhanced regional capacity to improve health systems in the ECSA Region” and Strategic Objective 8 – “Strengthened HIV/AIDS Programs in Region” have received technical assistance to strengthen pharmaceutical management systems with the aim of increasing access to quality pharmaceuticals and health commodities.

Towards this goal, RPM Plus has provided technical assistance to regional organizations, disseminated state of the art assessment tools, shared better practices and strategic information on drug management and logistics in the ECSA region. Specifically, interventions included institutional and human capacity building and direct technical assistance in selection, quantification, and procurement of public health supplies. The technical assistance and support has been channeled through the Regional Logistics Initiative (RLI), a unit established by the then USAID/REDSO’s PHN office, (now USAID/EA). The RLI’s mandate is to provide technical resources in various aspects of health commodity management systems including pharmaceutical policy development and systems management.

To facilitate activities, the Regional Pharmaceutical Forum was established in 2003, at the ECSA Health Community Secretariat, with RPM Plus as technical lead and with funding from REDSO. The RPF has four Technical Working Groups (TWGs) each comprising of experts in a given field. The TWGs are: Policy, Legal Framework and Management Support; the Procurement and Distribution Systems; the Promoting Rational Drug Use (PRDU), and HIV/AIDS-related Pharmaceuticals.

In FY 04 and FY 05, the TWGs, with technical assistance from RPM Plus, developed several documents, including Standard Treatment Guidelines for HIV/AIDS, TB and malaria. The Guideline was developed through harmonization of country specific treatment protocols. A complementary Regional Formulary, containing information on the products included in the STG, and a generic regional Medicines Policy were also drafted. These documents are intended to serve as entry points for the promotion of other pharmaceutical management activities e.g. the proposed Coordinated Informed Buying. In addition, malaria control activities, particularly in support of ACT policy implementation, were undertaken.

In FY 06, efforts will be directed at disseminating and advocating for country buy-in so that application and implementation of these documents and tools is obtained in order to achieve the stated goal. This will involve engaging various stakeholders including MOHs, Divisions of Pharmacy, USAID country missions, ECSA and other existing

vehicles for improving and accelerating appropriate medicine use in a sustainable manner e.g. national Pharmacy and Therapeutics Committees. The selected activities will be implemented in synergy with other RPM Plus regional activities conceptualized under different Strategic Objectives such as SO4 (HIV/AIDS), SO5 (AMR / ID) etc. Further, RPM Plus will aim to collaborate with other health promoting organizations in the region, for example, East African Community, Arusha and ANECCA (Makerere University, Uganda) etc.

Technical Objectives

1. To develop and advocate for implementation of enabling pharmaceutical policies for efficient commodity management systems to increase access to public health commodities in ECSA Region
2. To increase the capacity for providing effective drug management within health delivery institutions and systems in the ECSA Region.
3. To apply commodity management tools aimed at strengthening the pharmaceutical systems of countries in the ECSA Region
4. To document and disseminate strategic pharmaceutical management information and better practices within ECSA Region.

Major Activities Undertaken this Quarter

Submitted the reviewed documents; “Guidelines for the Management of HIV/AIDS, TB and Malaria in East Central” Model Formulary for HIV/AIDS, TB and Malaria for ECSA Countries and the “Generic Medicines Policy for ECSA Countries” to Washington for final technical review, editing and publishing.

Completed data collection for the assessment of the Pharmaceutical Management systems in ten of the fourteen countries. Analysis and report writing are on-going, but expected to be complete by end of December.

Developed a Unit on Pharmacovigilance which will be included in ANECCA’s “Curriculum for Comprehensive Paediatric HIV/AIDS Care for Health Workers in Africa”.

Corresponded with the three learning sites in preparation for the development of case studies as part of training materials for the planned short course on ART site strengthening. The primary objective of the course will be to facilitate rapid improvement of service delivery at ART sites, particularly in the pharmacy and laboratory,

LATIN AMERICA AND CARIBBEAN – AMAZON MALARIA INITIATIVE (AMI)

Overview

Malaria is one of the major infectious diseases that continues to present a serious threat in the Latin America and Caribbean region. The Amazon Malaria Initiative (AMI) was launched in March 2002, through USAID LAC/RSD-PHN, to address the impact of ineffective control and treatment of malaria in the Amazon Basin region (Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru, Suriname and Venezuela). This region began to experience a re-emergence of malaria in the early 1990s, including the appearance of *Plasmodium falciparum* and resistance to inexpensive, first-line antimalarial drugs. In response to early reports of resistance, the countries in the region have changed their drug policies for malaria to include new, more efficacious combination therapies. Strengthening the core elements of pharmaceutical management—including the policy and legal framework, selection, procurement, distribution, use and management—is essential to the effective implementation of these new policies.

RPM Plus was invited to participate in AMI as the technical partner for pharmaceutical management issues in 2002. The other partners in the Initiative are: the Pan American Health Organization (PAHO) Infectious Disease Division, the Center for Disease Control and Prevention (CDC), the United States Pharmacopoeia Drug Quality Information (USP-DQI) Program, National Malaria Control Programs in the Amazon region, and the local USAID Missions. RPM Plus works in collaboration with its partners to develop and implement strategies to strengthen pharmaceutical management for malaria in the region, particularly related to the new malaria treatment policies.

To date, RPM Plus has developed training materials; conducted three regional workshops on priority areas in pharmaceutical management; provided country-specific technical assistance to five countries to assess and improve their pharmaceutical supply systems for malaria; contributed to the Initiative's technical documents and study protocols; participated in annual meetings, regional workshops and dissemination activities; and, served on the Steering Committee.

FY06 funds are being used to continue providing technical assistance and building the capacity of the AMI country counterparts to improve their pharmaceutical supply systems for malaria and to manage them effectively. The focus in FY06 will be on using the information that countries generated in their pharmaceutical assessments with RPM Plus to plan and implement activities, which will improve the availability and use of malaria medicines and supplies.

Major activities this Quarter

RPM Plus attended the Steering Committee meeting in Washington, DC, October 4-5. During the meeting, RPM Plus presented its progress and accomplishments during the previous project year, as well as its work plan for the coming year. The members of the Steering Committee approved RPM Plus' work plan as proposed, which focuses on using

results from countries' assessments of availability and use (conducted with RPM Plus from late 2005 to the present) to plan and implement appropriate interventions. Due to the increasing emphasis on pharmaceutical management issues in AMI's regional strategy, all of the AMI countries have at least one pharmaceutical management activity in their work plans which requires some assistance from RPM Plus. RPM Plus does not have sufficient funds in its budget to program in-country technical assistance to all of them; however, it will attempt to offer support via correspondence and through regional workshops. RPM Plus' will also focus on documenting results and lessons learned from the AMI countries and communicating that information to a wider audience through publications and conferences.

At the Steering Committee meeting, RPM Plus and the PAHO regional coordinators agreed on the need to simplify and adapt the PMM assessment tools so that they can be used to monitor programs' availability and use of ACTs. A meeting to work on this activity jointly with RPM Plus, PAHO and CDC was proposed for November in Atlanta; however, PAHO was not able to travel at that time and thus the meeting was postponed until next quarter. Work has continued via email.

RPM Plus has been communicating with USP-DQI about conducting a regional workshop on drug quality assurance in May, modeled after the workshop the two organizations conducted in Tanzania in November. As proposed, the workshop would involve participants from AMI as well as the South America Infectious Disease Initiative (SAIDI), due to the organizations' participation in both regional initiatives and overlap in their country counterparts. The location has not yet been determined. Discussions are on-going.

RPM Plus continues to provide technical assistance to the malaria program in Guyana. Although no activities were carried out during the present reporting period due to the AMI country coordinator's absence in-country, communication about current and future activities were on-going. Preparations are being made for the RPM Plus AMI portfolio manager to visit Guyana early in the next quarter to develop a more detailed work plan with the malaria program and to facilitate discussions with other international organizations involved in procurement and pharmaceutical management in the country (namely SCMS, the World Bank and the Global Fund).

LATIN AMERICA AND CARIBBEAN – SOUTH AMERICAN INFECTIOUS DISEASE INITIATIVE (SAIDI)

Overview

Antimicrobial resistance (AMR) is threatening to undermine the advances achieved through priority health programs including tuberculosis, malaria, and HIV/AIDS, by rendering currently available treatments ineffective. AMR is the result of an increased exposure of microorganisms to antimicrobial medicines and the subsequent development of survival mechanisms in these microorganisms. The consequences of AMR include an increase in mortality, morbidity and in the cost of health care worldwide.

Among the many factors that influence the development of AMR, the major contributors from a public health perspective are the unnecessary use of antimicrobials for common conditions, the use of inappropriate doses of antimicrobials in cases when they are required, and the proliferation of poor quality or substandard medicines. Health systems contribute to this situation by lacking the proper legal frameworks to ensure the quality and appropriate use of antimicrobials, and by implementing poor managerial mechanisms for proper selection, procurement, distribution and use of these valuable medicines. Physicians, pharmacists and drug vendors contribute to unnecessary use of these drugs by prescribing and selling inappropriate treatments. Likewise, patients experienced with the benefits of antimicrobials tend to self-medicate inappropriately. The implication is that new strategies and more resources for second-line medicines may be needed in the near future for these highly prevalent diseases as conventional treatments fail.

An example of AMR of particular concern is multi-drug resistant tuberculosis (MDR-TB). The existence of strains of the TB bacteria that are resistant to multiple medicines traditionally used to treat TB is evidence of AMR in progress. Unfortunately, the prevention and containment of MDR-TB presents additional challenges to health systems because not only are the usual concerns regarding the appropriate use of antimicrobials applicable but because of the lengthy duration of the standard TB treatment (6 months), patient adherence also becomes an important issue. The emergence and spread of MDR-TB has serious implications for a national TB control program: treatment is longer and less effective than treatment of non-resistant tuberculosis and is significantly more costly.

In response to this growing challenge, the USAID Bureau for the Latin America and Caribbean Region (USAID/LAC/SD) has proposed a sub-regional strategy for the Andean countries and Paraguay, called the South American Infectious Disease Initiative or SAIDI. The general objective of this initiative is to contain the emergence and spread of AMR by improving the availability and the use of antimicrobials of assured quality. Thus, the central focus of SAIDI is rational use of antimicrobials and AMR control, with a special emphasis on preventing the emergence of MDR-TB.

Since FY04, RPM Plus and the other SAIDI international partners have been working with national counterparts in Bolivia, Peru and Paraguay to create a new, evidence-based and stepwise approach to local solutions for containing AMR. This approach considers

the factors contributing to AMR within the context of existing systems and not in isolation, and thereby takes advantage of the interaction among stakeholders. To date, national working AMR working groups have been formed in Peru and Paraguay. These groups, in conjunction with SAIDI international partners, conducted various assessment activities which lead to a holistic local view of the factors contributing to AMR. Currently, international and national partners are working together to develop and implement intervention strategies to address these contributing factors.

Major activities for this quarter

SAIDI international partners held a coordination meeting in early October. Progress in each of the three initiative countries was reviewed and work plans for FY06 were discussed. In both Peru and Paraguay, international partners will continue to support the activities included in the national logical framework for SAIDI. For Bolivia, partners decided to continue their work with existing national institutions and identify opportunities for the inclusion of other partners.

In Peru, RPM Plus met with national SAIDI partners in October to discuss implementation plans for activities in Callao. RPM Plus will support strengthening of storage and distribution and the creation and implementation of a drug information center. Plans are also underway to implement tools developed by the MoH and the VIGIA project in Callao, such as tools for monitoring infection control in health facilities. Training in good prescribing practices is also planned, using a model also developed and validated by VIGIA. In all cases, the MoH will present budgets for these activities that reflect MoH contributions and support requested under SAIDI.

Also in Peru, RPM Plus has been working with the national TB program and the office in DIGEMID in charge of management of TB drugs in developing a project to explore the presence of first-line TB drugs in private pharmacies in Callao. This activity stems from findings in an initial assessment of private pharmacies that indicated that roughly 30% of the pharmacies visited had at least one of the first-line TB drugs in stock. A consultant has been hired to collect data from pharmacies on the availability of these medicines, pharmacy staff's knowledge of tuberculosis and its treatment and the dispensing practices related to these medicines. Data collection will begin next quarter.

In Paraguay, RPM Plus conducted a workshop on pharmaceutical management with the pharmacists responsible for regional drug warehouses. The workshop was attended by over 40 participants from around the country and major health facilities in Asuncion. From the workshop discussions, several key problems in storage and distribution were identified. One of the problems that repeatedly came up in discussions was that participants felt they were not getting necessary support from their regional health directors and regional administrators mostly due to the lack of familiarity with pharmaceutical management issues. As a result of this workshop, the MoH requested a second workshop with these regional directors. This activity is planned for next quarter.

RPM Plus Activities and Products Status Report

RPM Plus is also working with the *Universidad Nacional de Asuncion* in strengthening its Drug Information Center, the only one in the country. In November, RPM Plus met with representatives of the university to discuss plans for improving the DIC. The possibility of conducting a training of trainers in pharmaceutical management for university professors was also discussed. RPM Plus will continue to work with the university in developing these activities in the following quarter.

With respect to TB, RPM Plus continued to provide technical assistance to the national TB program. A consultant will be hired to monitor progress on the implementation of personalized treatment boxes that initiated as a result of a recommendation provided by RPM Plus, and to provide recommendations on the best way to expand this practice to other areas of the country.

For Bolivia, during the SAIDI international partners meeting, PAHO/Bolivia requested a workshop on pharmaceutical management of tuberculosis medicines and supplies for the national TB program in Bolivia. This activity is also planned for next quarter.

LATIN AMERICA AND CARIBBEAN – TUBERCULOSIS

Overview

Since FY03, RPM Plus has provided technical assistance on TB Pharmaceutical Management to prioritized countries in LAC. With FY04 USAID LAC Bureau resources RPM Plus adapted, translated and disseminated *TB Pharmaceutical Management Guidelines*, and provided technical assistance to the NTP in Ecuador and Paraguay. Remaining FY04 resources (US\$ 7,000.00) will be used to respond to specific requests from both countries.

Major Activities this Quarter

No activities planned for this quarter. RPM Plus will explore the need of additional TA in January/07.

MALARIA ACTION COALITION (MAC)

Overview

Access to early and effective therapies for appropriate case management of malaria and the effective provision of intermittent preventive therapy (IPT) to women during pregnancy are fundamental to achieving substantial reductions in mortality and morbidity due to malaria. Effective case management for malaria requires that populations at risk seek, obtain, and properly use effective antimalarials. This is dependant on the timely accessibility of high quality, effective pharmaceuticals in the appropriate formulations and amounts and the appropriate use of these pharmaceuticals according to a correct regimen.

The burden of malaria has been intensified by the appearance of Chloroquine and sulfadoxine pyrimethamine-resistant *Plasmodium falciparum* forcing countries to change their first line therapies for malaria. To address this challenge, the World Health Organization (WHO) recommended that all countries, revising their first-line treatment policies for malaria, should opt for a combination treatment preferably an Artemisinin-based Combination Therapy (ACT)¹. In accordance with this recommendation, the Global Fund for HIV, TB and Malaria (GF) has urged countries that have obtained grants for malaria and recommending treatments other than ACTs to reprogram their funds to accommodate ACTs, which requires a more systematic approach to antimalarial pharmaceutical supply and use. As countries continue to receive GF awards for ACTs, the increased volume of antimalarial pharmaceuticals will place more pressure on pharmaceutical systems to ensure their proper management and use than the use of Chloroquine did. ACT pharmaceutical management is even greater as these products have a two year shelf life, they ten times more expensive than Chloroquine and the manufacturers' production capabilities are progressively being developed to meet the demand and the GMP requirements.

Given the current context of malaria in Africa, the Malaria Action Coalition (MAC)² underwent a strategic reorientation in 2004, placing a greater focus on technical assistance related to ACT policy design and implementation in order to effectively respond to these changes. In addition, MAC interventions have been divided into two separate but complementary components 1) Malaria in pregnancy, and 2) malaria case management where RPM Plus is focusing its technical assistance.

Officially USAID has ended MAC; however, at country level some missions still have remaining funds as well as a small amount of core funding that can be utilized for the

¹ WHO(2004). Position of WHO's Roll Back Malaria Department on malaria treatment policy

² The MAC is a partnership among; The Centers for Disease Control and Prevention, the MSH/Rational Pharmaceutical Management-Plus Program, the JHPIEGO/ACCESS Program, and the World Health Organization (both Geneva and AFRO offices)

same IRs. The RPM Plus Malaria MAC portfolio has been developed as a result of a joint work plan among the MAC partners and the work plan reflects activities exclusively planned under the MAC “core” funds (1.1 million).

Major Activities This Quarter

RPM plus attended the 6th annual review and planning meeting of the Eastern Africa Roll Back Malaria Network (EARN). During the meeting RPM plus provided technical inputs for pharmaceutical management and held meetings with EARN and RBM partners to discuss TA coordination in the region.

RPM plus conducted the TGF case studies, a complete draft report on the three case studies will be available to send to the Global Fund during the first week of January.

Collaborated with USP and WHO to conduct a three day regional workshop in West Africa on antimalarial pharmaceutical quality. Plans towards establishing a regional collaboration are underway.

RPM Plus reviewed and provided feedback to the World Bank training materials regarding the WB Booster kit for ACT implementation.

Made an oral presentation on "Improving Access to Medicines for Effective Malaria Case Management in Endemic Countries" at the APHA annual meeting.

Finalized the concept paper and methodology for the use of RDTs and developed a draft for data collection tools for internal review

TA to DRC PNLP to conduct monitoring in the 2 planned provinces, Bas-Congo (4 health zones) and Kasai Occidental (3 health zones)

RPM plus conducted a workshop to validate reviewed Malaria treatment guidelines , reviewed and reproduced IEC poster of malaria treatment protocol and reviewed the activity report and recommendations from the assessment of drug distribution system in Burundi.

An assessment of antimalarial use and availability in the community and the private sector in Mali was conducted; the assessment report was disseminated to stake holders at all levels. Support is also provided to finalize the training modules tailored for the private sector.

Provided support to Tanzania and participated in the ACT Management Working Group meetings using REDSO funds

RPM Plus provided provide support to the Kenya DOMC in recruiting a Program Associate for MIS/M&E at the DOMC to support MIAS implementation and procurement of computers and laptops for the establishment of the DOMC MIAS.

RPM Plus Activities and Products Status Report

RPM Plus continued to provide support to the Kenya DOMC through the Drug Policy and Technical Working Group, major DPTWG meeting to discuss ACT implementation was held in November 2006. In addition, RPM Plus attended a meeting of the DPTWG's drug management sub-committee. RPM Plus held one on one meetings with the Division and with KEMSA to monitor the progress of ACT implementation and plan next steps.

Continued coordination within MSH/RPM Plus Kenya teams as well as MSH/LMS project teams to leverage experiences and lessons learnt.

WEST AFRICA REGIONAL PROGRAM (WARP)

Overview

MSH/RPM Plus working under USAID/WA provided technical support for pharmaceutical capacity and systems strengthening in West Africa. This was in continuation of capacity building efforts started in the previous quarter FY06 during which RPM Plus and AWARE-RH jointly organized a regional quantification training for Francophone West African countries in Dakar Senegal from the 21 to 25 August 2006. However, owing to language barrier Anglophone countries in the sub-region could not participate in this training. In order to meet the needs of these Anglophone countries, MSH/RPM Plus and AWARE-RH organized regional quantification training in Accra Ghana from November 27 to December 01, 2006. Specific objectives of both trainings were to provide a forum for sharing common experiences and challenges encountered in the quantification of pharmaceutical needs, and to strengthen national level capacity in the quantification process for HIV/AIDS, Malaria and Reproductive Health programs. The overall goal was to improve the procurement processes of the participating countries for GFATM grant implementation.

In consultation with USAID/WA, specific activities were identified for this year. These activities will continue to focus on capacity building and supporting GFATM pharmaceutical functions at country level.

Major Activities This Quarter

Two major activities took place during this quarter.

- 1) Quantification training for Anglophone West African countries in Accra Ghana. Five countries were represented at the training; Cameroon, Ghana, Liberia, Sierra Leone, and The Gambia. A total of 21 participants from HIV, malaria and reproductive health programs attended this training.
- 2) The preparation and submission of a work plan to USAID/WA for FY06 funding stream. The work plan delineates two principal activities; training of trainers from three regional training institutions for the teaching of pharmaceutical supply management and the second activity is provision of technical assistance to three (3) priority global fund benefiting countries in West African aimed at supporting GFATM pharmaceutical supply management functions.

NARRATIVE: COUNTRY PROGRAMS

ANGOLA (PMI)

Overview

In August 2005 USAID/PMI conducted an initial assessment to identify appropriate areas for PMI investment in Angola. An important consideration was that Angola had obtained a Global Fund grant to support the national malaria control program, including the procurement of ACTs, provider trainings, and establishment of a viable distribution system, among other activities. An initial shipment of 475,000 treatments arrived in Luanda in February 2006 and the second and final shipment of 625,000 treatments in April, 2006. Unfortunately, at the time preparations to receive, distribute and appropriately manage and use the ACTs at the health facility level had not been finalized. In light of this, RPM Plus was requested to assess existing plans and work with PMI partners in Angola support finalization and implementation of these while making needed preparations for the receipt and distribution of ACTs procured through PMI .

The RPM Plus Malaria overall strategic objective “*Strengthened health systems for the appropriate management of malaria*” supports the USAID/Bureau for Global Health (BGH) SO5 “*Increased use of effective interventions to reduce the threat of infectious diseases of major public health importance*”, SO3 “*Increased use of key child health and nutrition interventions*” as well as SO2 “*Increased use of key maternal health and nutrition interventions.*” RPM Plus’ activities under the Angola PMI country program will focus on the following technical objectives:

1. Improve the supply and quality of antimalarials and related supplies; and
2. Improve the management and use of antimalarials.

Major Activities this Quarter

RPM Plus traveled to Angola and held a series of meetings with the NMCP, EDP, GFATM, WHO and EU to understand the current situation with regards to; revising the EDP management system to incorporate Coartem into that system, status of Coartem distribution for GFATM-financed program and status of operational planning for PMI, including a visit to Huambo Province to assess the status of Coartem distribution

Prepared a draft set of procedures for managing Coartem at health facility and provincial level. The draft was finalized after discussing with partners and will be tested in Huambo during the first phase of PMI implementation

Reviewed current storage capacities at Angomedica and the EDP and recommended practical steps to be taken to ensure adequate control of PMI supplies at central level

Worked with EDP, USAID, MENTOR, World Vision, and NMCP to finalize the EDP forms and procedures for developing a Coartem management system for ACT implementation plan.

ARMENIA

Overview

The healthcare system in Armenia has been recently undergoing dramatic changes including a transition to a new health care model. The government has been committed to the health reform and achieving improvements in access to primary care services and health financing, as well as to optimization of resource use. Since 2000, the transition to a new model of health care has been supported by USAID within the framework of the Armenian Social Transition Program (ASTP) and follow-on Primary Health Care Reform (PHCR) Project, in line with its strategic objective of increased utilization of sustainable, high quality primary healthcare services in the country. In May 2005, a team from RPM Plus conducted a rapid assessment of the pharmaceutical system in Armenia. Based on findings from a rapid assessment carried out by RPM Plus team, three streams of activities were proposed for RPM Plus support: improving prescribing practices for key PHC and Family Medicine diagnoses/conditions, analyzing the availability of essential medicines for selected standard treatment guidelines (STGs) and their costs, and exploring alternative supply chain strategies for the Basic Benefits Package (BBP). To implement these activities, baseline data of current practices and costs were collected in May-September 2006. RPM Plus worked with local institutions to support data collection activities in health facilities and private retail pharmacies.

Major Activities this Quarter

RPM Plus team worked with the data sets provided by the American University of Armenia (AUA) and Scientific Center for Drug and Medical Technology Expertise (SCDMTE), to code/recode the data for subsequent analysis and ensure consistency of the data. Prior to the workshop, the results of the analysis were presented and discussed with USAID and USAID partners (PHCR and NOVA), SCDMTE and other partner organizations. On November 21, RPM Plus held an all-day workshop on Supply and Use of Medicines for Primary Health Care of Armenia. The objective of the workshop was to share the findings/results from the RPM Plus studies, validate the findings, discuss next steps and receive a feedback regarding these steps, in preparation for a broader stakeholder conference. The participants included officials/experts from the MOH, State Health Agency (SHA); marz health authorities; Deputy Head of Yerevan Municipal health agency; SCDMTE; PHC providers from marzes and Yerevan, WHO, PHCR, NOVA, and AUA. The topics discussed during the workshop covered prescribing practices in PHC facilities, cost implications of these practices, availability of tracer medicines in PHC facilities and retail pharmacies, and supply chain costing study results. During the plenary session, the participants addressed specific situations and problems with availability and use of STGs in the respective marzes and shared their views on importance of STGs and ensuring and monitoring of quality of care and health care costs. Other issues discussed during the workshop included harmonization of guidelines, to support decision making of providers, and complexity of the approaches to ensure providers adherence to guidelines. While some participants made an emphasis on the importance of regulatory actions to enforce compliance, it was discussed that behaviour

change, due to its complexity, requires a number of interventions (training and follow-up, incentives, etc). The workshop also allowed for receiving a feedback from the MOH, including SHA, regarding possible strategies that the government may plan on developing in the future.

Future Activities

RPM Plus team will prepare a report that will include analysis and recommendations for next steps, based on the feedback received from the stakeholders. The initial intent was to hold a second, larger stakeholder meeting during the second quarter of FY07 (late January or early February). However, based on the preliminary feedback received from the Ministry of Health it is possible that this meeting will not be required to move forward with the agenda of improving the supply system. In the meantime, RPM Plus will start preparations for the DTC work in the country. Based on the information from the SCDMTE and in coordination with PHCR, a number of facilities will be selected to participate in the DTC work. RPM Plus will carry out a workshop for the health experts/officials from MOH, marzes and managers of the PHC facilities, prior to the training course, to explain the concept and the importance of the DTC and obtain their support for the upcoming work. RPM Plus will also start work on preparing training materials. Given large volume of the material for the TOT course, including presentation materials and guides for participants and trainers, RPM Plus will build on existing RPM Plus training material in Russian used in the NIS earlier; this material in Russian will be edited and updated, based on the current English version. RPM Plus is planning to visit Armenia in February to carry out work on DTC.

BENIN

Overview

In 2002, the first regional depot was established in Parakou as a subsidiary of the CAME Cotonou. Its purpose was to strengthen the logistics system and reduce stock-outs at the health centers in the Borgou/Alibori region. As a subsidiary of the CAME Cotonou, products (essential drugs, vaccines and contraceptives) were to be sold at the same prices offered by the CAME. It was created for the exclusive distribution of products from the CAME Cotonou.

The regional depot was designed to maintain autonomous internal management, but placed under the responsibility of a steering committee, which reports to the management committee of the CAME. Yet since its establishment, there have been reports of frequent stock outs of essential medicines in the Borgou/Alibori region, and studies showing that the system had not truly decentralized to provide greater autonomy to the region.

With the extension of PROSAF and given the requirement for sustainability, USAID considers it crucial to create an environment that secures the effective management and availability of family health products in health zones. Also, given the new context of decentralization, the health system should allow communities representatives to better participate in management of medicine chain.

It is expected that the decentralization of the drug management system will result in an increased participation of stakeholders in decision-making and also bridge the gap between the management of drug and the impact of drug delivery on the health conditions of end users.

In response, USAID/Benin requested RPM Plus to complete a study that would assist them and the MOH to determine a plan for the further development of the public pharmaceutical supply system in Benin. The study objectives are aimed specifically to:

- Determine the current effectiveness and efficiency of the distribution system
- Identify opportunities for improvements in effectiveness and efficiency
- Assess options for further decentralization based on the above

Major Activities this Quarter

The report is being reviewed for final editing

BRAZIL

Overview

WHO ranks Brazil among the 22 highest burden countries for tuberculosis (TB) in the world. Brazil's national TB program estimates that it has approximately 110,000 cases annually with 3,000 TB patients dying each year. In 1995 the Government of Brazil (GOB) moved TB control back to the federal level and established the currently existing Program for the Control of Tuberculosis (PCT). In early 2003 as part of its TB management reform, the GOB appointed the *Hélio Fraga TB Reference Center* (Helio Fraga TB Center) as the matrix for controlling the quality of TB diagnostics and treatment in the GOB's national Single Health System (*Sistema Única de Saúde*). Overall, the Helio Fraga TB Center is responsible for developing, analyzing and transferring technologies to combat TB in the country and to monitor the approximately 1,300 cases of multi-drug resistant TB (MDR-TB).

RPM Plus has identified two technical objectives which are key to meeting the challenge of strengthening local TB drug management capacity:

- Objective 1: Improve the appropriate use of TB drug regimens
- Objective 2: Strengthen the national TB control program

Major Activities this Quarter

Monitor national study to re-evaluate appropriate drug regimen for TB failures

After the withdrawal of clofazimin in the MDR-TB standardized regimen and the need to re-formulate a new regimen, new discussions are on-going on potential re-formulation of Brazil TB re-treatment regimens. A committee of Brazilian and international experts has been formed and is studying modifications to current schemes which might produce some changes in the study protocol recently approved by Anvisa. RPM Plus is waiting for the experts group's conclusions to define if the schemes will be changed and if the protocol will have to be adapted.

Support national study to re-formulate first line TB drugs to fixed-dose combination (FDC) products

RPM Plus was asked by the NTP-MOH/Ministry of Science and Technology to join and support the technical expert group in charge of developing a South-to-South collaboration between Brazil, South Africa and India in pharmaceutical related issues concerning TB such as the production of FDCs or MDR-TB monitoring. The workshop was held in November 2006 in Cape Town, South Africa with the following objectives: information exchange between the three countries on TB research; sharing of best practices; and developing joint activities in areas of substantive collaboration. The three main areas of discussion in the workshop were drug and vaccine development, development of new

diagnostic methods, health systems research and operational research, including management of MDR-TB and HIV-associated TB.

RPM Plus had several meetings with Farmanguinhos to monitor results and progress for: finalizing final steps of rifampicin and isoniazid tablets (FDCs) production, developing other formulations of Rifampicin, Isoniazid and Pyrazinamid (FDCs) with new ordered raw materials, preparing the TB products calendar for TB area production during the transferring of manufacturing activities from Manguinhos site to the new plant of Jacarepagua which is expected to be completed in the first trimester of 2007.

Coordinate decentralization of the quality control system for TB pharmaceutical management

Monitoring of on-going progress in the established workplans to meet quality standards of the 3 state laboratories - Amazonas, Goiás, and Ceará - using the MOST tool in partnership with INCQS continues during this quarter.

A Poster was presented at the 2006 IUATLD congress in Paris, France on the LabMost using results and observations from its application in different labs in partnership with INCQS.

Expand DMIS surveillance system for managing MDR-TB patients

The first version of the *Guide for Epidemiological Surveillance and Information System for MDR-TB Control* has been edited and distributed to TB professionals and MDR-TB Reference Centers at the National Congress of Brazilian Society for Phtisiology and Pneumology in Fortaleza.

The revision and updating of data in the database for the DMIS system led in October 2006 to the following results: 2584 Notifications forms and 5574 Follow-up forms have been revised, corrected and entered in the new system, contributing to the quality and quantity of information of the MDR-TB national database.

Three out of four abstracts proposing a cross cutting look over the initiatives on MDR-TB surveillance systems in Brazil, Moldova and Romania supported by RPM Plus were submitted to the Global Health Council 2007 and were accepted.

CAMBODIA

Overview

Since 2001, RPM Plus has worked with the Ministry of Health and other partners in Cambodia to determine the strengths and weaknesses of the pharmaceutical system at the central and community levels to support access to essential medicines, especially in relation to child health and malaria services. Consistent with the technical objective of developing the capacity of governmental or non-governmental organizations (NGOs) to analyze pharmaceutical management issues, RPM Plus provided technical assistance to a local NGO, the Reproductive and Child Health Alliance (RACHA), to conduct a community drug management of childhood illnesses (C-DMCI) assessment of household and provider behaviors in childhood illnesses in the public and private sectors in late 2004. Key findings from the C-DMCI survey, in addition to similar and recent studies have repeatedly identified four significant gaps in pharmaceutical management that crosscut issues related to child survival and malaria:

- Low availability of essential medicines
- Unknown or substandard product quality
- Expansive role of a largely unregulated private sector
- Irrational use of medicines.

Based on discussions with Mission staff, there is a desire to address these gaps in pharmaceutical management by working with in-country partners through existing programs in USAID priority geographic areas. Additionally, these issues reflect the lack of capacity at the national level within the drug regulatory authority for monitoring drug quality and activity within the private sector. Findings from the WHO sponsored study of the MOH capacity to scale up HIV/AIDS treatment programs indicate similar gaps in supply management found in previous pharmaceutical sector assessments with corresponding needs for improvement. Although not a part of this current work plan, a comprehensive approach to strengthen pharmaceutical supply management will also benefit the management of HIV/AIDS related pharmaceuticals and related commodities.

Major Activities This Quarter

RPM Plus traveled twice to Cambodia this quarter. In October, RPM Plus met with Mission staff to discuss current RPM Plus activities and introduce the newly appointed MSH consultant. During this meeting, Mission staff and RPM Plus agreed to disseminate the Community Drug Management of Childhood Illnesses (C-DMCI) survey results and suggested recommendations through existing government channels instead of holding a partners workshop as previously scheduled. Consequently, RPM Plus presented the C-DMCI results at multiple meetings; the child survival management committee meeting, a donors meeting hosted by a local NGO; MediCam, a national medical conference sponsored by WHO and a national level pharmaceutical management in malaria training

course. In addition, RPM plus developed and emailed a two page summary of the report to all key stakeholders.

Another key issue discussed by RPM Plus and Mission staff is the apparent lack of understanding among stakeholders of the complex interplay of issues related to pharmaceutical management. The public health component of the pharmaceutical sector in Cambodia is characterized by multiple parallel procurement mechanisms, weak inventory management, and poor distribution. As such these conditions contribute to the lack of coordination and poor performance of the organizations and agencies that provide pharmaceutical services. In an effort to address these issues, the Mission requested RPM Plus to submit a proposal to conduct a systematic analysis of key components of the pharmaceutical management system in order to identify and analyze options to improve the supply system. Data collected for the options analysis may also serve as a baseline to assess impact of subsequent interventions.

During December 4-8, 2006, RPM Plus, in collaboration with the National Center for Parasitology, Entomology and Malaria Control, conducted a five day pharmaceutical management of malaria training course at the national malaria center in Phnom Penh. The course was funded through RDM/A. This is the first time an RPM Plus pharmaceutical management for malaria training course was offered in the region. It is anticipated that future pharmaceutical management of malaria training courses offered in the sub Mekong region will be funded by the Asia Collaborative training Network for Malaria (ACTMalaria) with technical assistance provided by RPM Plus.

Attending this course were 22 participants from six USAID priority provinces and 12 participants from national level organizations, including the national malaria control program, procurement unit, planning unit, central medical stores, and national laboratory. The course provided information and hands-on practice to facilitate technical staff's understanding and implementation of basic pharmaceutical management concepts and methods as well as the monitoring the implementation process in the context of pharmaceutical management.

DOMINICAN REPUBLIC

Overview

The Dominican Republic (DR) National TB Program (NTP) is currently receiving support from the USAID Mission in Santo Domingo to expand the implementation of the WHO-supported strategy Directly Observed Treatment Short Course (DOTS). One of the main pillars for the success of DOTS is to ensure the continuous supply of quality medicines and pharmaceutical supplies for TB and their appropriate use according to standardized treatment regimens.

With USAID DR funds, the Management Sciences for Health Rational Pharmaceutical Management Plus (RPM Plus) Program is currently providing technical assistance to the NTP in DR to strengthen the Pharmaceutical Management Information System (PMIS), and to introduce fixed dose combinations (FDC).

Major Activities this Quarter

RPM Plus consultants visited Dominican Republic from November 7 to 10, to assess the availability of TB medicines in the central medical store, and health facilities (through information provided by the PMIS). As a result decisions were taken to adjust the estimation of needs for future procurements of loose medicines and FDC.

Health facilities in pilot areas for the introduction of FDC were visited. Few problems were identified and solved during the visit. The scale up to the rest of the country is scheduled for March, 2007.

RPM Plus and CHO consultants visited Dominican Republic (November 13 – 17) to facilitate a meeting to update the standard operating procedures (SOP) manual and the technical guidelines of the NTP. A draft version of the SOP and the guidelines was elaborated during the meeting. A local team is responsible for the elaboration of the final documents.

ETHIOPIA

Overview

Rational Pharmaceutical Management Plus (RPM Plus) Program/Management Sciences for Health (MSH) is collaborating with USAID/Ethiopia in the provision of technical assistance in drug and related commodities management; ARV procurement for and the President's Emergency Plan for AIDS Relief (The Emergency Plan); and President's Mother and Child HIV Prevention Initiative (PMTCT) in Ethiopia.

Under this effort, RPM Plus is assisting in national, regional, district, and health facility-level capacity development for delivery of ART/PMTCT services and ensuring access to and rational use of basic ART/PMTCT products through various interventions including:

- Strengthening human capacity
- Strengthening overall supplies management system including procurement, storage and distribution.
- Improving the physical infrastructure of drug and laboratory facilities to ensure security and quality of ARV drugs and related products provided under the program in the target sites.
- Establishing a monitoring and evaluation system to track selected supply indicators and develop and operationalize a management information system that will track stock level and expiry of ARV drugs
- Undertaking other public-private initiatives that will improve access to quality pharmaceutical and laboratory services, promote patient education, improve rational use, and establish drug & therapeutic committees at target facilities in support of ART and related services
- Technical support and coordination of ART commodities through operation of an in-country RPM Plus office.

Major Activities this Quarter

Regular report is presented at the bi-weekly TWG meeting with USAID and other partners. Patient ARV up-take has increased from 46,984 to 50,867 and the number of beneficiary sites has increased from 118 sites to 204 during the two first months in the quarter.

SCMS is in the process of setting its operations for ARV drugs procurement and distribution taking over responsibilities from RPM Plus. Gabriel and Francis Nyame Aboadje (Kofi) were here from Washington to establish the office and help in the start up operations. Negussu Mekonnen and Hany Abdallah were on an SCMS orientation workshop in Washington from October 23 to November 3, 2006. Hany Abdella is the Lead Technical Advisor for SCMS in Ethiopia. SCMS is co-located with RPM Plus/MSH and Negussu serves as the Chief of Party for both projects. Two RPM Plus staff (Shimels from procurement and Alemayehu from Laboratory/EHNRI) will be moved to SCMS to ensure seamless transition.

Gabriel Daniel from RPM Plus headquarters spent six weeks in Ethiopia and participated in the Awassa ARM event, the 'Basic ART training for Pharmacists' workshop organized by EPA in Dire Dawa, the AMR workshop in Nazreth, and the training of pharmacy professionals from private hospitals in ARV drugs management. He visited several ART sites and observed progress of renovation work in Dire Dawa, Harar and Addis Ababa.

RPM Plus representatives participated in the October 2-5, 2006 Annual Review Meeting (ARM) of the Health Sector Development Program (HSDP III) and launching of the Health Commodities Supply System (Logistics Master Plan) of the Ministry of Health held in Awasa.

RPM Plus was represented at the National Task Force for national HIV/AIDS campaign meeting, organized by HAPCO, where 340,000 people are targeted for nation-wide VCT by end 2006, which is part of a MOH campaign to put 22 - 44,000 persons on treatment between December 2006 and March 2007.

RPM Plus in close collaboration with partners assisted in the review of the draft PMTCT guideline and costing of PMTCT products.

DACA and RPM Plus had a Joint Plan of Action (POA) development retreat in Nazareth. The document is being finalized for joint implementation.

RPM Plus has conducted the final procurement of ARVs through IDA with pipeline funds. SCMS will takeover subsequent procurements.

RPM Plus actively participated in the quantification and costing exercise organized by USAID/CDC for scale-up of ART and PMTCT in 100 health centers to be supported by PEPFAR partners.

Based on RPM Plus current performance in procurement and distribution of PMTCT products from the Axios Donation Program, RPM Plus is collaborating with HAPCO to assist in Fluconazole (Diflucan) procurement and distribution through the same mechanism.

Drugs and supplies were effectively and timely distributed to sites with no incident of stock outs at 204 ART and 255 PMTCT health facilities.

Eleven health facilities benefited from renovation and upgrading of structures (dispensing pharmacy, drug store, counseling rooms, PMTCT, laboratory, incinerator and dispensing booths.) during the quarter. Renovation is nearing completion in additional twenty health facilities.

RPM Plus has engaged five local contractors and assigned them to operational zones so that renovation work can be speeded up and undertaken at several sites simultaneously.

RPM Plus has distributed 567 Dixon Shelves, 95 lockable and 95 filing cabinets, in addition to refrigerators, office tables and chairs this year.

14 health facilities have benefited from RPM plus support to pay the bill for installed telephone lines and internet at ART pharmacies. 7 lab benches and cupboards were purchased and delivered to DQCTL

During the stated period, various training and workshop activities were conducted benefiting a total of 191 participants (160 males and 31 females) composed of pharmacy professionals, physicians, microbiologists, nurses and media persons. Topics include: HIV Care and ART, SOP/MIS for ARV Drugs Management at Health Facilities, and AMR.

A two-day Call-to-Action National Workshop on Antimicrobial Resistance (AMR) Containment was held in Nazareth. It was a follow-on activity to the preliminary workshop held in April 2006. Participants were drawn from Regional Health Bureaus, Universities, FMOH, DACA, FMOARD, EHNRI, AHRI, mass media, professional associations, hospitals, and external experts from the US.

Laike and Shimelis (RPMPLUS/Ethiopia) and Assefa (HAPCO) were sponsored by MSH RPMPLUS Ethiopia to attend Supply Chain Management of HIV-AIDS medicines and medical supplies in South Africa from Oct. 22- Nov. 4/06.

MSH/RPM Plus staffs supported various partners in providing training in SOP/MIS for ARV drugs management at health facilities and other topics as requested.

RPM Plus participated in the Nutrition Profile MOH/USAID consultative meeting and in a workshop organized by DACA on ADR reporting plan on herbal drugs.

ARV drugs monitoring MIS formats have been revised, consistently reprinted and distributed to new and old ART sites all over the country.

17 additional computers with printer and UPS have been distributed to various ART sites to support computerized recording system.

4 additional data clerks have been employed to support recording activities at ART sites bringing the total number of data clerks to 52.

New MIS format (register) for tracking information on drugs for opportunistic infections has been developed and distributed for use at selected health facilities.

Two Good Laboratory Practice (GLP) training manuals on Laboratory Safety and a draft of Standard Operating Procedures (SOPs) to supplement the Quality Control Manual of the DQCTL are in the final stage of editing.

RPM Plus sponsored three persons (two from DACA and one from MOH) to a WHO organized workshop “Regional consultative Meeting on Quality of Anti Malaria” held in Tanzania.

KENYA

Overview

The President's Emergency Plan for AIDS Relief (Emergency Plan) was started in 2003 and emphasizes prevention of HIV infection, care for HIV-infected individuals and AIDS orphans and treatment of HIV-infected people through provision of antiretroviral drugs on a large scale in the poorest, most afflicted countries. The Emergency Plan identified fourteen priority countries which have the highest prevalence of HIV infection and account for nearly 20 million HIV-infected men, women and children. Kenya is one of these priority countries. MSH/RPM Plus is among the partners that were assigned the task of implementing the plan

Under COP 2006, RPM Plus continues to work with USG PEPFAR Team, Ministry of Health(MOH)/NASCOP, MOH/NPHLS, MOH/Department of Pharmaceutical Services, NGOs, Private sector, and other ART implementation partners to strengthen the commodity management system with an aim of improving access to , and use of health commodities for the treatment and care of those affected by HIV/AIDS. The key objectives under this portfolio are:

Objective 1: To provide technical leadership and assistance to the PEPFAR Inter-Agency Team , MEDS and other Supply Chain organizations to plan, quantify, procure, and provide oversight to the distribution and use of quality pharmaceutical products for HIV/AIDS programs in support NASCOP (National AIDS Control Program) and The Presidents Emergency Plan For Kenya.

Objective 2: To increase the capacity of Ministry Of Health to identify, prioritize and address pharmaceutical management issues in order to improve access to, and use of, quality pharmaceutical products for HIV/AIDS programs.

Objective 3: To increase the capacity of Ministry Of Health/NPHLS to identify, prioritize and address issues to improve access to and provision of quality laboratory services as needed for HIV/AIDS programs.

Major Activities This Quarter

Support to PEPFAR Supply Chain Management

RPM Plus worked collaboratively with MEDS and the Inter-agency team in ensuring that the ARV drugs were distributed for over **54,000** patients in **125** Kenya PEPFAR program approved sites. About 53% of these sites are public sector sites. Secondly, a total of **135 sites** (73% of public sector sites) were now receiving PMTCT ARV drugs through RPM Plus.

RPM Plus also organized and conducted a workshop to train key staff from MEDS, NASCOP/MoH, NLTP/MoH, MSF- Spain and Belgium, CDC team, AIDSRelief, Walter

Reed Program, COGRI, AMPATH, and UNITID on the ART quantification tool, QUANTIMED

Support to NASCOP and the National ART Program centrally:

RPM Plus has continued to support NASCOP centrally through the provision of TA and support to institutional and human capacity development efforts, and all NASCOP ART Taskforce sub-committees. Also, TA was provided for the production of National ART commodity management curricular for the training of dispensing staff on commodity management and for developing regional trainers at various primary health care ART service levels.

In October, 29 staff from ART sites received Training of Trainers course on Effective management of ART commodities in PHC settings. The aim of the workshop was to pretest the curriculum and develop a core team of regional pharmaceutical management trainers. These trainers will be used by NASCOP to upscale human resource capacitation through out the country.

Development of additional curricula and training materials to strengthen commodity management and rational use of medicines was completed; Standard Operating Procedures (SOPs) Rational drug use, ADRs, Adherence and Medication use counseling and pharmacotherapy of opportunistic infections. These curriculums will be pre-tested in the next quarter.

In order to demonstrate the effectiveness of the MTP approach in training, RPM Plus in collaboration with NASCOP introduced MTP in two-day training in November to the five selected test sites. The key areas selected by the sites for strengthening are institutionalization of an ADR system, development of key SOPs for commodity management, availability of updated bin cards and reference materials and labels.

Strengthening of laboratory systems at national and site level to support ART services:

RPM Plus continued to provide TA to strengthen laboratory services in support of ART by working collaboratively with the NPHLS and other national laboratory ICC stakeholders and sub-committees.

To support national level laboratory efforts, RPM Plus worked collaboratively with national HIV reference lab, NASCOP and Kenya Medical Training College (KMTTC) to compile and customize existing laboratory ART SOPs for national use.

In collaboration with NPHL, RPM plus finalized drafting and technical review of six (6) job aids in support of ART lab monitoring.

To support selected ART sites, RPM Plus trained 26 staff from 11 coast sites and disseminated laboratory SOPs to these sites

In collaboration with the Nairobi Provincial Medical Office, RPM Plus conducted a rapid assessment on 42 facilities to determine interventions for strengthening their laboratory capacity to support ART, TB and Malaria programs.

MEXICO MAARD FOR TB

Overview

Since 2001 RPM Plus has been working to develop methodologies and tools to help National Tuberculosis Control Programs (NTPs) to identify opportunities for utilizing the concepts of incentives and enablers specifically for the improvement of TB program performance. These may target patients, providers (e.g., public or private health workers at all levels, treatment supporters), and/or managers. Work on incentives and enablers represents one component of the larger RPM Plus portfolio that aims to improve access to and use of medicines and diagnostics for tuberculosis. In June 2006 the USAID Mission in Mexico requested technical assistance from RPM Plus to assist the Mexican NTP with the development of a comprehensive incentives program for the health personnel.

Major activities in this quarter

In September 2006, RPM Plus met with USAID and NTP representatives in Mexico City. One of the principal objectives of this visit was to analyze the actual usage of an incentive based system by NTP health care workers. Another objective of this visit was to evaluate the capacity of the NTP to organize and implement this incentives based system. A third objective was to organize a workshop to fully implement this system.

In December a workshop entitled “Strategies to implement an incentive based system within the NTP” was held for NTP program staff. As a result of this, a proposal was developed that details a comprehensive incentive-based system for health service workers

NAMIBIA

Overview

The Rational Pharmaceutical Management Plus (RPM Plus) Program of Management Sciences for Health (MSH) has received additional funds from USAID/Namibia under the President's Emergency Plan for AIDS Relief Country Operational Plan (COP 06) to continue technical assistance activities initiated with PMTCT, Track 1.5, Track 2.0 and COP05 funding in order to assist the Ministry of Health and Social Services of Namibia. The funds will continue to assist in the review of appropriate recommendations for the development and implementation of various interventions to strengthen pharmaceutical management systems in Namibia in order to continue and sustain the scale-up of HIV/AIDS activities. Activities under COP 05 funding were grouped within four broad objectives.

Under COP 06, activities will continue to be carried out through the same four main objectives. The first is to strengthen the policy and legal framework as well as the national management support systems for HIV/AIDS-related pharmaceuticals and commodities. The second is to strengthen human resources for the management of HIV/AIDS related pharmaceuticals. The third is to strengthen pharmaceutical and commodity management systems and procedures of Central Medical Store, Regional Medical Stores, and treatment facilities for HIV/AIDS-related pharmaceuticals. The fourth is to strengthen the rational use of HIV/AIDS-related pharmaceuticals and the provision of comprehensive pharmaceutical care in treatment facilities in support of the provision of PMTCT and ART services.

Major Activities this Quarter

During this quarter, the ART dispensing Standard Operating Procedure (SOP) was finalized, with the reporting forms tested in 6 facilities. A total of 11 facilities received on-site technical support visits. RPM Plus continued to provide technical assistance and support for improving quantification of medicine requirements both at the national level as well as the level of treatment facilities. Field support visits indicate that quantification at the facility level has still much opportunity for improvement. Though there have been no reports of stock-outs of ARVs at any facility, however, overstocking has been observed during some of the field visits.

The Implementation plan for the provision of minor equipment to treatment facilities in support to pharmaceutical services was finalized and is currently awaiting approval by the MoHSS. The items to be supplied have been identified during the previous facility assessment aimed at determining the equipment requirement necessary for ART scale-up. Recommended equipment include pharmaceutical storage equipment, computers for the installation of the ART Dispensing Tool (ADT) and other various dispensing aids.

Meanwhile RPM Plus is working with the MoHSS towards the roll-out of the ART Dispensing Tool (ADT) to more ART treatment facilities. This has allowed the tool to be now installed at three additional facilities; Eenhana, Outapi and Engela and a plan is set to have it also rolled out to Katima Mulilo in January 2007. To-date, the tool is established in seven (7) high volume facilities. It has now been reported that the tool has allowed these facilities to increase the accuracy of their ART monthly reports and has assisted them in the generation of “daily dispensing patient lists” thus tracking patients not turning up for their replenishment appointments. Anecdotal reports indicated that the ADT tool has helped some of the facilities to reduce dispensing time as well as dispensing errors.

During this quarter, RPM Plus obtained the necessary approvals in support to the position of a Medicines Information Pharmacist for the Therapeutics Information and Pharmacovigilance Center (TIPC). The Pharmacist for the TIPC has been identified and has been offered the position. RPM Plus provided technical assistance to the TIPC working group for the submission of the request for new services to the MoHSS Policy Management, Development and Review Committee (PMDRC). A functional TIPC will ensure that health care workers are provided timely, accurate and unbiased information on ARVs and other medicines and will ensure that adverse drug reaction reports are collected and used to inform guidelines modification and regulatory functions.

Meanwhile, RPM Plus continued to provide support to the Medicines Control Council registration database leading to significant improvement in the process of recording medicines and also in registration processing time. During the course of 2006, 29 new ARVs were registered bringing the total, as of December 31, 2006, to 74 ARV products. Of this total, 49 products are now generics/multi-source ARV medicines. This registration process improvement for ARVs has increased the availability and accessibility of cheaper ARVs in Namibia, particularly in the private sector.

In support to the MoHSS plans for decentralization, RPM Plus provided technical assistance to improve pharmaceutical services at the pilot site of Katatura Health Center. Meanwhile, the program also provided training on community rational drug use to home based care and community based organizations in the Ohangwena region.

NICARAGUA

Overview

USAID/Nicaragua has been supporting Rational Pharmaceutical Management Plus (RPM Plus) technical assistance in pharmaceutical management since 2002 as part of the overall support to health sector reform. RPM Plus analyzed the Nicaraguan Ministry of Health's (MoH) pharmaceutical supply system. As a result of this study and following workshops, the MoH decided to support the establishment of private sector mechanisms modeled after the "Programa de Ventas Sociales de Medicamentos" (VSM) to promote the creation of a network of retail outlets to sell low-cost quality-assured essential medicines. RPM Plus has supported the strengthening of the VSM network in the areas of financial management, pharmaceutical quality assurance, and the training of dispensers. Standardized procedures for each of these areas were developed in FY05. For FY06 RPM plus will support the implementation and evaluation of these proposals.

Major Activities this Quarter

The final versions of the reports "*Standardized Manual for Quality Assurance*" and "*Standardized Manual for the Training of Dispensers*" was completed, edited and distributed to USAID and local counterparts. The implementation of the *Quality Assurance Manual* will start on February 2007 with the presentation of the document, and training of the pharmacists. The implementation of the *Manual for the Training of Dispensers* will start on March 2007 with the training of the facilitators of the course. RPM Plus will support the implementation process and evaluation of both activities.

Regarding the study on "*Financial Administration of the VSM*", the first draft of the report was submitted on November 2006. It did not meet the ToR, so RPM Plus did not accept it as a final product. A local health economist was hired for five days to support the analysis of the information. With this input and comments provided by RPM Plus, the final version of the report should be ready by the end of December 2006.

RWANDA

Overview

MSH/RPM Plus has continued its efforts aimed at strengthening district pharmacies and ART sites, reinforcing institutional and organizational capacity of CAMERWA, and providing appropriate TA and support to MOH through PTF, CPDS, and TRAC.

With CAMERWA, several joint technical and management meetings were held to finalize the strategy for the upcoming active distribution of ARVs and other essential drugs. A joint team made of CAMERWA and MSH/RPM Plus visited the warehouses of the Fuel Group in South Africa to learn from their experience in active distribution of drugs both in the public and private sector. Lessons learned will be used in the development and implementation of the active distribution system in Rwanda. MSH/RPM Plus has organized a strategic planning retreat with the top management of CAMERWA facilitated by an external consultant assisted by the Senior Resident Advisor. The strategic plan to be developed will reflect the new vision of CAMERWA as well as its strategic axes, resources and targets for the period of 2007-2010. The first draft is expected by January 2007. In addition, MSH/RPM Plus has provided CAMERWA with a Data Assistant to enter patient records and monthly consumption data from July to December 2006 using an updated version of the ART Tracking Tool. Another consultant has started the process leading toward the development and implementation of CAMERWA's procurement plan, which needs to reflect the requirements of the National Tender Board. Small equipment and materials for the active distribution are being purchased in anticipation of the imminent launching of the new system. Finally, several coordination meetings were organized between CAMERWA, SCMS, DELIVER and MSH/RPM Plus to harmonize the interventions of each agency to avoid duplication and waste of resources.

MSH/RPM Plus has provided assistance and support to technical committees of the CPDS on issues related to quantification, data management and inventory management. MSH/RPM Plus coordinated the work of USG clinical partners as it pertains to the pharmaceutical sector. HIV/AIDS Rapid test kits for USG supported partners were managed by MSH/RPM Plus during the last quarter.

Major Activities this Quarter

During the last quarter, MSH/RPM Plus worked with the Pharmacy Task Force to review and integrate comments and remarks from the Ministry Justice on draft policies related to NDA and National Drug Registration System. In addition, we provided assistance in the identification and involvement of medical specialists to provide feedback for the draft documents related STGs and the National Formulary. Comments and inputs will be integrated into the second drafts by a small technical working group. Once finalized, these documents will be tested for the adoption by stakeholders.

With regard to strengthening district pharmacies, 8 district pharmacies to be seconded to MOH have completed one month orientation and training in pharmaceutical management. One district pharmacy has been fully upgraded and materials and equipments are being purchased according to norms. 7 out of 9 are rehabilitated at 50-60%, while two (Bugesera and Nyagatare) are behind schedule. The Drug Management Information System through the use of the ART Dispensing Tool has been strengthened in 22 sites. The target is to reach 25 sites by February 2007. Joint field visits were organized in collaboration with TRAC, PTF to collect and verify the quality of data in ART sites using PMTCT protocol. Data collected will be used for the next quantification of drugs for PMTCT.

Finally, MSH/RPM Plus has organized a workshop on development or adaptation of the tools for the Integrated Supportive Supervision in collaboration with HIV/PBF, TRAC, PCIME, RP/FP, Integration Task Force, PTF, PNILT, PNILP, Districts and other partners such as FHI, EGPAF, CONCERN, and ICAP. 14 participants attended the workshop facilitated by two MSH Consultants.

SENEGAL

Overview

Over the last few years RPM plus has worked with the Ministry of Health and other partners in Senegal to determine the strengths and weakness of the pharmaceutical system to support child health and malaria services, in particular IMCI, malaria treatment and the prevention of malaria during pregnancy.

Recent surveys conducted by the MoH, RPM Plus and BASICS II, studying Drug Management for Childhood Illness in the public sector and also at community level, discovered some weakness in drug availability and use that have been the target of activities by RPM Plus in conjunction with the MoH, BASICS II and other partners. These activities have focused on strengthening aspects of drug management for childhood illness.

Senegal has recently changed their first line policy for malaria treatment from a combination of amodiaquine and SP to an artemisinin combination treatment (ACT) of artesunate and amodiaquine and have introduced intermittent preventive therapy (IPT) using SP to prevent malaria during pregnancy. This raises new challenges in assuring the availability and rational use of drugs, especially in light of the findings of an RPM Plus study on IPT which showed that women did not receive antimalarials at antenatal clinics, but rather bought them from the private sector.

The RPM Plus activities in Senegal are grouped into the following objectives:

1. Provide TA to the Senegal USAID Mission and MoH for drug management of malaria and child survival
2. Strengthen national capacity for drug management to improve availability and use of drugs in the public sector
3. Strengthen national capacity for drug management to improve availability and use of drugs in the private sector
4. Strengthen national capacity for drug management to implement malaria treatment and malaria in pregnancy

Major Activities this Quarter

This quarter, RPM Plus continued to advance malaria activities in support of the national malaria program (PNLP). RPM Plus completed an antimalarial assessment through Global Fund bottleneck activity funding. Data collection tools were developed and circulated to partners for review before survey implementation. Data collection occurred over a ten-day period (Oct 16-26th, 2006). Data was analyzed and a workshop was held to

share recommendations with stakeholders. Based on the results and recommendations generated from the assessment and subsequent discussion with stakeholders, RPM Plus suggested installing a committee responsible for follow-up on the recommendations generated by the assessment. In addition to encouraging committee development, RPM Plus initiated contacts and discussed with partners from the Ministry of Health possible collaboration on the development of a district level drug management reporting tool to be used for monthly supervision.

In activities related to tuberculosis (TB), RPM Plus participated in several meetings with stakeholders and partners to discuss options for providing technical assistance to the national TB program in response to the planned change in national policy in TB treatment to reduce the length of treatment. The national TB program coordinator met with RPM Plus and approved organization of a workshop led by RPM Plus focused on exploring pharmaceutical procurement options through the Global Drug Facility (workshop tentatively planned for April 2007). RPM Plus also participated in a dissemination meeting to discuss results of an external review of the national TB program. Recommendations generated from the review included improving the management of pharmaceutical products for the management of TB as well as developing a quality assurance system and a surveillance system to monitor HIV/TB co-infection and drug resistance.

All budget lines are now closed for Senegal activities and continuing support to ongoing activities will continue through core funding where appropriate.

SOUTHERN SUDAN

Overview

The Southern Sudan Interim Health Policy (Draft December 2005) mentions malaria as a particular challenge and gives priority to maternal and child health interventions. As a key step, the Government of South Sudan with inputs from key partners has drafted the first national Roll Back Malaria (RBM) strategic plan 2006 – 1011. Most national public health programs such as malaria control have been disrupted by several years of conflict; such programs will therefore require comprehensive support to achieve the expected health results while developing the technical, organizational and institutional capacities of their staff. In this context, USAID Sudan Field Office (SFO) has mandated RPM Plus, to provide support to the Ministry of Health in establishment of a functional National Malaria Control Program (NMCP). The support is part of the USAID SFO multi-sectoral strategy³ for infectious diseases including malaria.

The RPM Plus strategy is composed of a two pronged approach that builds the NMCP capacities while supporting its coordination within the Government and with the different actors involved in malaria activities. RPM Plus activities under USAID/G/BGH SSO5 focus on the following technical objectives:

1. Support the development of effective antimalarial drug policies at the global, regional and country level;
2. Enhance the understanding by policy makers of household and community antimalarial drug use by effective development of interventions for implementation of drug management;
3. Enhance the rational use of antimalarials through interventions at global, regional and country provider and user levels;
4. Enhance the capacity of prenatal services to improve the treatment and prevention of malaria in pregnant women.

Major Activities this Quarter

Supported NMCP to finalize the national RBM strategic plan 2006/7 – 2010/11. NMCP was also supported to integrate the updated case management guidelines into technical guidelines and to develop a national integrated vector management (IVM) strategy.

Support to roll out the new malaria treatment policy was provided in developing a roll out plan, support supervision checklists for all levels of health services and mapping of health partners for all 10 states.

³ USAID Sudan Strategy Statement (2006-2008)

Supported the NMCP to refine the core malaria indicators in the M & E plan and update its KAP study tools to include standard RBM indicators.

Facilitated the NMCP participation at the East Africa Roll Back Malaria Network (EARN) annual malaria planning and review meeting and visiting the Tanzania pharmaceutical management system to share lessons and adopt best practices.

TANZANIA (PEPFAR)

Overview

Roll out of Accredited Drug Dispensing Outlets (ADDOs)

Duka la Dawa Baridi (DLDBs) were constituted by the Tanzania Food and Drugs Authority (TFDA) to provide non-prescription drugs in the private sector, as opposed to pharmacies that provide both prescription and non-prescription drugs. DLDBs constitute the largest of licensed retail outlets for basic essential drugs in Tanzania. It is estimated that there are more than 4,600 DLDBs across all districts in the country; over 50% more than all public health facilities and 11% higher than all public, voluntary, and religious facilities combined.

Although they provide an essential service, DLDBs are not operating as had been intended; prescription drugs that are prohibited for sale by the TFDA are invariably available for sale, quality cannot be assured, and the majority of DLDBs dispensing staff lack basic qualification, training, and business skills. In response to these problems, the TFDA and MOH developed a new approach to improve access to quality-assured non-prescription and a limited number of prescription drugs from regulated and properly operated drug outlets staffed by trained drug dispensers' services in rural and peri-urban areas. The success of TFDA/MSH/SEAM collaborative pilot program in establishing a network of Accredited Drug Dispensing Outlets (ADDOs) in Ruvuma region led the MOH and TFDA to roll out the program throughout the country.

The proposed roll out for ADDO in Morogoro and other regions in Tanzania would run in two phases: first introduce the basic elements of ADDO and phase two would focus on incorporating Child survival and HIV/AIDS prevention, treatment and care components.

Strengthening Pharmaceutical Management in Mission Hospitals

In May 2001 the Management Sciences for Health (MSH) Center for Pharmaceutical Management (CPM), under the SEAM project and in partnership with the Tanzania Ministry of Health, conducted an assessment of the public and private pharmaceutical sectors in Tanzania. The assessment revealed access gaps in respect to drug availability, primarily in the public sector. To address this gap, strategies were developed that included the development of an alternative, private sector supply system to compliment and augment the Medical Store Department (MSD) supply system.

As part of this strategy, MSH/RPM Plus will provide technical support to Christian Social Services Commission (CSSC) and Mission for Essential Medical Supplies (ELCT/MEMS) affiliated hospitals to strengthen pharmaceutical management (quantification, forecasting, rational drug use, information management etc) in support of HIV/AIDS national response. CSSC represents a group of 81 Lutheran, Catholic and Anglican hospitals in Tanzania In view of the regionalization approach, RPMPlus will also collaboratively work together with implementing partners to provide TA to strengthen pharmaceutical management in the facilities for which they are responsible.

This means RPMPlus activities widens from only CSSC/ELCT/MEMS affiliated hospitals to any hospital (government or NGO) in the country as will be requested by any of the implementing partners.

Major Activities this Quarter

This quarter RPM Plus accomplished the following activities:

Activities related to ADDO roll out in Morogoro region

1. Carried out training of ADDO dispenser for Kilosa district. The training started on September 18, ended on October 21, with a district launch, officiated by the District Commissioner for Kilosa. A total of 148 owners and 210 ADDO dispensers passed their final evaluation exams and were certified by TFDA as ADDO dispensers.
2. Final inspection of outlets applying for accreditation was carried at various stages and a total of 129 outlets out of the 146 or 88.4% were approved for accreditation. Other 26 outlets are in their final stages to meet ADDO premise standards and 17 outlets seem to have failed and are closing up their businesses..
3. To strengthen the inspectorate and control system at local and district level 90 ward inspectors and 10 district inspectors were trained in Kilosa. The newly trained local inspectors will be responsible for quarterly inspections in their respective wards and submit reports to District drug Committees and TFDA.
4. Sensitization and mobilization workshops were held with district authorities prior to the start of implementation of ADDO program in Mvomero and Morogoro rural districts. A total of 487 people (comprising of 55 delegates from both district authorities, 29 ward executive officers, 221 Village executive officers, 19 ward health officers, 8 community development officers, 81 public and private HF in Charges and 129 DLDB owners-potential ADDO applicants, participated in the workshops.
5. Training of local inspectors for Mvomero and Morogoro rural districts at ward was conducted immediately after the sensitization. This approach incorporates ward level inspectors throughout the implementation process, thus acquiring more skills and knowledge on practical inspection. A total of 86 ward level inspectors were trained in both districts.
6. Mapping and pre-inspection activities were carried out in Mvomero and Morogoro rural districts. A total of 220 DLDB outlets were identified.
7. RPM Plus provided technical support to TFDA to develop the ADDO implementation guide that will be used by any implementing agency to ensure standardized approach to implementation of similar activities in different districts. This activity is funded by DANIDA.

Next Steps:

1. Interview for selection of ADDO dispensers for the dispenser's course will be done in the second week of January.
2. Training of owners on business skills and management course by MEDA will be done during the third week of January 2007
3. Training of dispensers-two phases for both districts (Mvomero and Morogoro rural) is planned to start during the 4th week of January and run through February 2007
4. Accreditation and joint launching of ADDOs for both districts will take place in February immediately after the end of the course.

Activities related to strengthening HIV/AIDS pharmaceutical management system.

1. Conducting training workshop on HIV/AIDS pharmaceutical management
 - RPM Plus in collaboration with the National AIDS Control Program (NACP), Christian Social Service Commission (CSSC) and PEPFAR partners conducted a five days training workshop on HIV/AIDS pharmaceutical management. A total of 30 participants from 5 regions of Tabora, Tanga, Dodoma, Arusha and Kilimanjaro were trained. The ART sites in those regions supported by the following PEPFAR partners included: EGPAF-15 sites (2 regional hospitals, 8 district hospitals, 5 FBO hospitals and 1 private hospital, FHI- 7 sites (1 regional, 1 referral, 1 FBO, 4 districts hospitals and 1 OVC/Village of Hope center, and AIDS Relief -one designated district hospital.
2. Support NACP in adaptation and implementation of Standard Operating Procedures (SOPs) for ART pharmaceutical management
 - RPM Plus held preliminary discussions on SOPs with NACP and identified priority areas in HIV/AIDS pharmaceutical management. Once finalized the draft SOPs copy will be shared with NACP and other partners supporting HIV/AIDS pharmaceutical management.
3. Provide technical assistance in installation and use of RPMPlus ART dispensing tool to strengthen existing data reporting.
 - Demonstration of how the tool works was done to NACP pharmacist. NACP suggested that the tool should be piloted in few facilities before scaling up its use in many facilities. Orientation on ART Dispensing tool is planned to take place in the early January 2007 and will involve Participants from 10 facilities only.
4. Working collaboratively with NACP/PEPFAR Partners/CSSC in implementation of activities related to strengthening of HIV/AIDS Pharmaceutical Management System.

- RPM Plus package of intervention was shared with NACP/ FHI/AIDS Relief/EGPAF and CSSC. PEPFAR partners agreed to work collaboratively with RPM Plus through leveraging resources to strengthen ART Pharmaceutical services.

Next activities:

1. Finalize the draft of SOPs for ART pharmaceutical management.
2. Organize a two days orientation course on computerized ART Dispensing tool for ART sites staff.
3. Joint planning with NACP and PEPFAR partner on supervision schedule of the facilities whose staff participated in the training.

TANZANIA (PMI)

Overview

In 2005 the US Government conducted a rapid assessment in Tanzania and in March 2006 asked the Rational Pharmaceutical Management Plus (RPM Plus) Program to provide technical support for the implementation of the President's Malaria Initiative (PMI) in Tanzania. In the context of the national policies, the RPM Plus/PMI program activities will support the National Malaria Control Program's (NMCP) ACT policy implementation through private sector distribution of subsidized ACT through the Accredited Drug Dispensing Outlet (ADDO) program, technical support to the Medical Stores Department (MSD) and support to Tanzania Food and Drug Authority (TFDA) to strengthen Pharmacovigilance systems in country with the view of monitoring possible Adverse Drug Reaction (ADR) including that due to ACTs.

RPM Plus is currently providing technical support to Tanzania for the implementation of Artemisinin-based Combination Therapy policies through USAID Regional Economic Development Services Office (REDSO) for Eastern, Central and Southern Africa (ECSA) but also support the distribution of essential medicines, including antimalarials pharmaceutical through the private sector under the Accredited Drug Dispensing Outlets (ADDOs).

RPM Plus strategy under the Tanzania PMI country program focuses on the following technical objectives:

1. Improve the supply and quality of antimalarials and related supplies; and,
2. Improve the management and use of antimalarials.

Major Activities this Quarter

The quantification assessment report to determine ACT needs for approximately 400 ADDOs in Ruvuma and Morogoro regions was finalized. Annual estimates of 661,393 treatment courses of Artemether-Lumefantrine have been determined.

Identified a potential pharmaceutical wholesaler/distributor (in Dar es Salaam) for distribution of ACT through ADDOs. The terms, scope of work and financial implications have been discussed with the wholesaler/distributor and forwarded to MSH/RPM+ contract office and the PMI team.

Developed pricing mechanism and determined the price of ACT through ADDOs, the price determination was based on operation costs, port clearance including destination inspection fee, storage and distribution, incentives for regional distributors and ADDOs and percentage recovery of FOB value of procured ACT. The prices of Tshs

1500/treatment course for adults and 500.00 Tshs for children were shared with NMCP, PSU, and TFDA.

Developed ACT distribution plan, there will be one main distributor in Dar es Salaam and at least one in each region where ADDOs have been accredited. Terms and scope of work for each have been developed.

TFDA management approved the proposed work plan for Pharmacovigilance (PV) implementation. A PV working group has been formed and started working on the planned PV activities in the two selected pilot districts (Ulanga and Kilombero).

RPM Plus participated in a joint meeting with MSD, NMCP, PSU on ACT distribution plan and inventory management. Integrated logistics management form was adapted and modified to capture more consumption data related to ACT distribution and use at facility level

In support of the ACT Policy Implementation, supported and facilitated training of 139 pharmaceutical personnel in the districts of Arusha, Dodoma, Mtwara, Lindi, Shinyanga, Kagera, Mara, Mwanza, Manyara, Kilimanjaro and Tanga Regions

NMCP requested MSH/RPM Plus to participate in preparation of launching of ACT in Tanzania; the launching is scheduled for 15th January 2007.

Participated in PMI coordination meeting and discussed the progress of implementation of activities under PMI funding, challenges, possible solutions and next steps.

UGANDA (PMI)

Overview

RPM Plus assistance is solicited to support and strengthen the distribution of insecticide-treated bed nets procured with GFATM funds to children under five years old, 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 national first-line treatment.

RPM Plus activities under the Uganda PMI country program focus the following technical objectives:

- 1) To strengthen the existing pharmaceutical management system for the integration of 15.5 million treatment doses of Artemether-Lumefantrine (Coartem®) 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.
- 2) To provide technical support to the Uganda Ministry of Health to scale up its malaria control activities with an emphasis on malaria treatment activities, particularly the roll-out and rational use of ACTs.

Major Activities this Quarter

Developed FY 2007 draft country operational plan for RPM Plus

Attended the National Health assembly, the Malaria Partners meeting to plan for National malaria activities for FY 2007 and the select committee meeting to discuss report for the restructuring of National Medical Stores

Financed the distribution of 34,860 doses of Community Coartem for the 3 conflict districts of the North

Held 3 meetings for the supply chain management committee

Quantified National Coartem quantities for FY 2007

Initiated the rescheduling of ACTs to OTC medicines with the National drug authority

RPM Plus Activities and Products Status Report

Designed a draft for tracking antimalarial use for Health facilities and districts

Supported the NMS in identifying and overcoming their distribution constraints

Facilitated Coartem receipt in the Private not for Profit sector from Joint medical store

Developed a two year operational plan for Medicine procurement, storage and distribution

Attended the joint Review mission and 4 national logistics committee meetings for the phase in of community Coartem

Held a two day workshop for the phase out of Chloroquine and other mono-therapies

Worked with NDA to develop a plan of action for phase out implementation and develop a workshop report

VIETNAM

Overview

In June 2004, Vietnam was selected as the 15th country to receive USG assistance under The Emergency Plan; the intent is to bring a comprehensive response package to the HIV/AIDS problem in Vietnam through the development of sustainable prevention, care and treatment programs at all levels of the health care delivery system.

The HIV/AIDS epidemic in Vietnam is still in the “concentrated epidemic” stage by UNAIDS criteria. The disease has spread quickly in specific subpopulations, particularly among injecting drug users (IUD), commercial sex workers (CSW) and men who have sex with men (MSM). Through HIV/AIDS case reporting, the Ministry of Health estimates there are 76,189 HIV infected people in the country, of them 11,659 are AIDS patients. Deaths from AIDS reached 6,550 by the end of 2003. The current status of the epidemic does not mean it is restricted to these groups. With a population of 80.7 million (July 2004 est.), Vietnam is now facing a rapidly growing epidemic that is extending beyond the initial concentrations of drug injecting and commercial sex worker networks. Since 1998, all of Vietnam’s 61 provinces have reported HIV and 12 provinces have each reported more than 1,000 HIV infections.

RPM Plus visited Vietnam in September 2004 to discuss with key stakeholders how RPM Plus can best support efforts to mitigate the impact of the epidemic. In January 2005, RPM Plus began providing technical assistance in support of ART implementation, and opened an MSH office in Hanoi. Since that time, RPM Plus has provided technical assistance in quantification of ARVs and OI medicines, procurement, distribution, recording and reporting of pharmaceutical management information at implementation sites, and site system strengthening. In addition, RPM Plus has provided support to the Vietnam Administration for HIV/AIDS Control (VAAC) on issues of pharmaceutical management of HIV/AIDS.

The RPM Plus strategy calls for three objectives:

- **Objective 1:** Enhance the capacity of governmental, international or local partners in Vietnam to systematically identify, prioritize and address pharmaceutical management issues to improve access to and use of quality pharmaceutical products and other commodities for care, prevention and treatment of HIV/AIDS
- **Objective 2:** Strengthen the pharmaceutical management capacity of referral, provincial, district, and other facilities to ensure an uninterrupted supply of quality HIV/AIDS pharmaceutical and other commodities at ART service delivery sites
- **Objective 3:** Procure ARVs on behalf of selected ART implementation sites, in accordance with Vietnamese National Standard Treatment Guidelines and USAID procurement regulations

Major Activities this Quarter

RPM Plus continues to provide support at the national level to the Vietnam Administration for HIV/AIDS Control (VAAC). RPM Plus participated in approximately 9 meetings during this period with various stakeholders, including the Global Fund, WHO, USAID, CDC, VAAC, PAC, VCHAP, FHI and Clinton Foundation. Meetings were held throughout the period to review and update stakeholders on issues regarding the management of ARVs and other commodities.

RPM Plus provided support to the Ministry of Health at an HIV/AIDS decree workshop. Staff met with representatives from the Vietnam Administration for HIV/AIDS Control (VAAC) and the MOH to review recent ART training sessions.

RPM Plus met with PEPFAR partners in Ho Chi Minh City to introduce patient records and CAREware software. The software was demonstrated and observed at 2 later meetings with CDC representatives in Hanoi. RPM Plus staff also met with PEPFAR partners to review ARV status and OI samples prior to procurement.

RPM Plus staff conducted 20 regular monthly visits to provide initial ART assessments, implement programs to improve pharmaceutical management and review current ARV management at USG supported sites in Hanoi and Ho Chi Minh City. RPM Plus provided assistance in quality assurance of ARVs and other commodities. Staff members assessed the cold chain procedures and ambient reagents of Central Pharmacy Company (CPC) #1.

FINANCIAL INFORMATION

Rational Pharmaceutical Management Program Plus

Fiscal Data: October 1, 2006-December 31, 2006

HRN-A-00-00-00016-00

On September 28, 2000, Management Sciences for Health was awarded the RPM Plus cooperative agreement, the follow-on to the Rational Pharmaceutical Management Project. The RPM Plus current ceiling increase is US\$162,035,912 as a result of receiving a 3 year extension and ceiling increase in September 2003 and a subsequent ceiling increase in June 2005. The cumulative obligation for RPM Plus currently stands at US\$148,497,808.

MSH tracks and reports expenditures by source of funding (Global or Core and Field Support, by Bureau, Region, and Country). MSH further subdivides Global or Core expenditures based on the various Strategic Support Objectives designated by USAID when funding is received (e.g., SO1-Population, SO4-HIV/AIDS, SO5-Infectious Diseases).

The Fiscal Data chart shows the Year 1 through Year 7 obligations, cumulative funds obligated, quarter four expenditures, in addition to the cumulative to-date (October 1, 2000 to December 31, 2006) expenditures of US\$116,782,977 by funding source.

The RPM Plus cooperative agreement stipulates that MSH should cost-share an amount not less than US\$21,000,000 over the life of the program. As of December 31, 2006, RPM Plus to date has surpassed this cost-share requirement, generating over the required US\$21,000,000 in non-Federal funding, within the technical scope of work for RPM Plus.

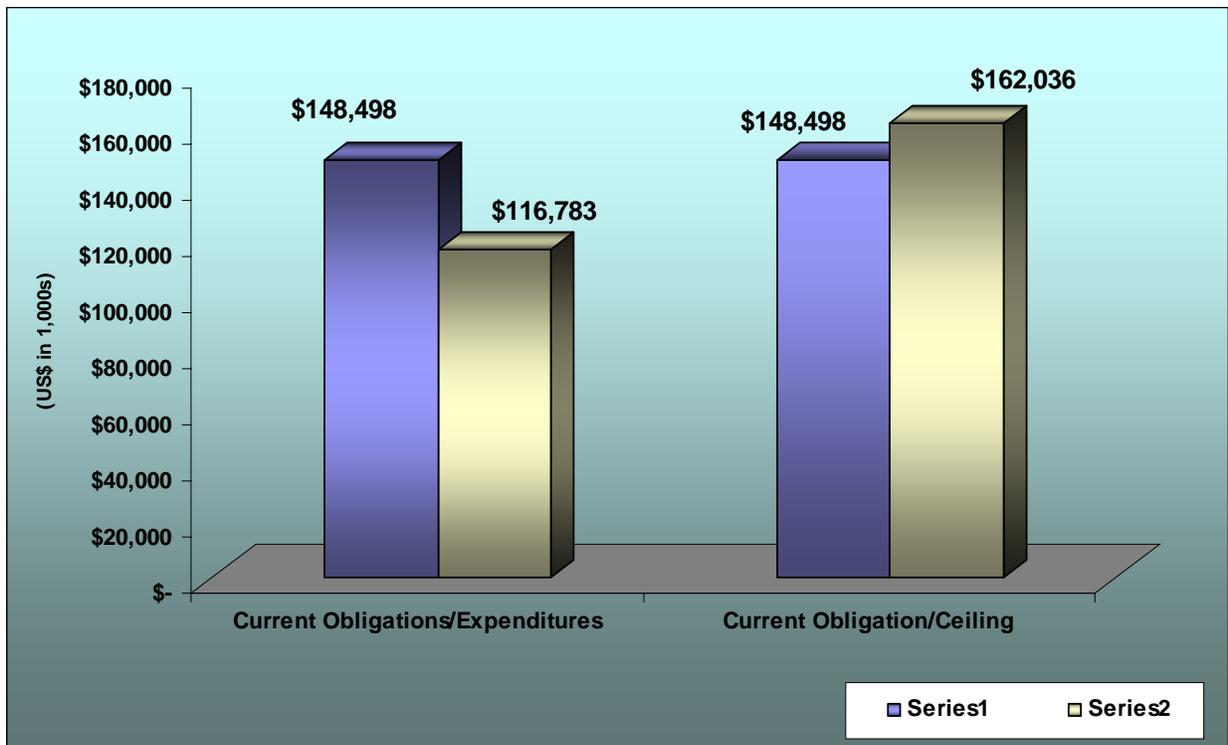
RPM Plus Activities and Products Status Report

**Rational Pharmaceutical Management Program Plus
Fiscal Data; Close of Fiscal Year 06, Quarter 1
HRN-A-00-00-00016-00**

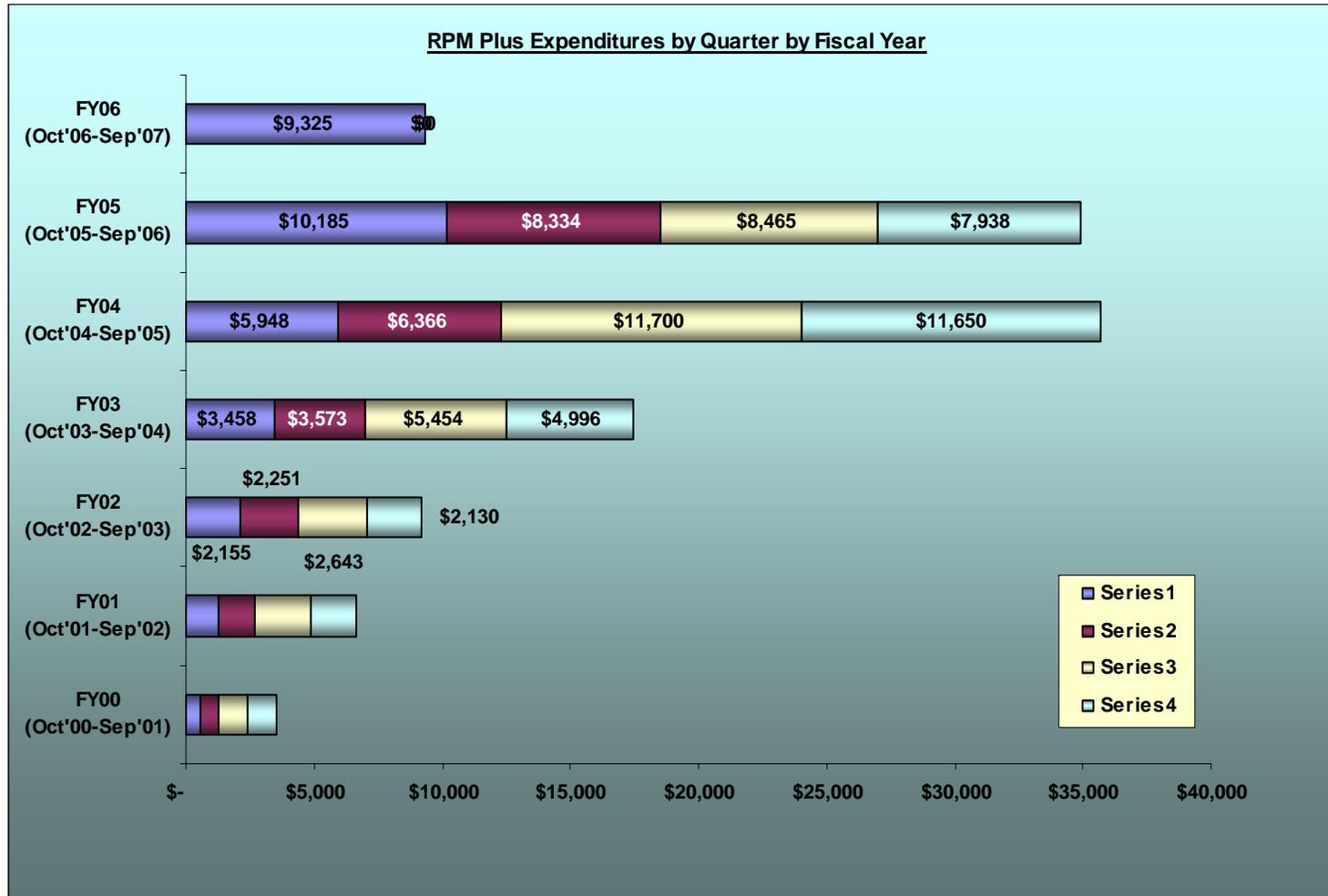
Funding Source	Funding Type	Total Obligated Year 1	Total Obligated Year 2	Total Obligated Year 3	Total Obligated Year 4	Total Obligated Year 5	Total Obligated Year 6	Total Obligated Year 7	Cummulative Obligated 31-Dec-06	Q1 Expenditures Oct-Dec 2006	Grand Total Spent 31-Dec-06	Grand Total Remaining 31-Dec-06
Core												
SO1: POP	Core	\$ 100,000				\$ 250,000			\$ 350,000	\$ 82,999	\$ 376,068	(\$26,068)
SO2: Maternal Health	Core	\$ 275,840	\$ 354,000	\$ 230,000	\$ 200,000	\$ 230,000	\$ 349,450	\$ 315,000	\$ 1,954,290	\$ 64,169	\$ 1,379,812	\$574,478
SO3: Child Survival	Core	\$ 269,440	\$ 587,000	\$ 573,280	\$ 745,000	\$ 725,000	\$ 292,100	\$ 950,000	\$ 4,141,820	\$ 190,951	\$ 2,972,630	\$1,169,190
SO4: Sub Total		\$ 200,000	\$ 650,000	\$ 900,000	\$ 1,300,000	\$ 800,000	\$ 500,000	\$ 1,120,000	\$ 5,470,000	\$ 176,238	\$ 4,112,101	\$1,357,899
SO5: ID/AMR Core	Core	\$ 574,387	\$ 1,175,000	\$ 1,205,000	\$ 1,200,000	\$ 1,520,000	\$ 1,482,450	\$ 1,000,000	\$8,156,837	\$301,500	\$ 6,597,429	\$1,559,408
SO5: Malaria Core	Core		\$ 420,000			\$ 866,725	\$ 297,000		\$1,583,725	\$59,879	\$ 1,353,123	\$230,602
SO5: Malaria/MAC Core	Core			\$ 1,325,000	\$ 1,150,000	\$ 1,600,000	\$ 1,100,000		\$5,175,000	\$423,869	\$ 4,475,681	\$699,319
SO5: ID/TB Core	Core	\$ 410,333	\$ 810,000	\$ 1,200,000	\$ 1,250,000	\$ 1,188,000	\$ 1,290,000	\$ 1,120,000	\$7,268,333	\$341,707	\$ 6,040,135	\$1,228,198
SO5: Sub Total		\$ 984,720	\$ 2,405,000	\$ 3,730,000	\$ 3,600,000	\$ 5,174,725	\$ 4,169,450	\$ 2,120,000	\$ 22,183,895	\$ 1,126,954	\$ 18,466,368	\$3,717,527
Common Agenda	Core	\$ 800,000	\$ 1,030,538	\$ 1,650,000	\$ 973,000	\$ 773,000	\$ 800,000	\$ 773,940	\$6,800,478	\$137,260	\$ 6,044,362	\$756,116
Mainstreaming	Core					\$ 135,000	\$ 62,510	\$ 123,500	\$321,010	\$43,632	\$ 131,896	\$189,114
Core		\$ 2,630,000	\$ 5,026,538	\$ 7,083,280	\$ 6,818,000	\$ 8,087,725	\$ 6,173,510	\$ 5,402,440	\$ 41,221,493	\$ 1,822,204	\$ 33,483,237	\$7,738,256
Bureau/Field Support Funds												
LAC/SPO-PMTCT	FS					\$ 1,200,000			\$1,200,000	(\$2,637)	\$ 1,095,787	\$104,213
Africa Bureau Sub Total		\$ 290,000	\$ 700,000	\$ 250,000	\$ 650,000	\$ 250,000	\$ 70,000	\$ -	\$ 2,210,000	\$ 37,145	\$ 1,784,308	\$425,692
Asia/Near East Bureau Total	FS	\$ 200,000	\$ 150,000	\$ 590,000	\$ 400,000	\$ 200,000	\$ 200,000		\$1,740,000	\$113,303	\$ 1,656,754	\$83,246
RDM/A Sub Total		\$ -	\$ -	\$ -	\$ -	\$ 780,000	\$ 600,000	\$ 600,000	\$ 1,980,000	\$ 53,460	\$ 132,317	\$1,847,683
G/PHN NGOs/OFDA	FS	\$ 50,000						\$ 120,000	\$170,000	\$34,488	\$ 95,145	\$74,855
E and E Bureau	FS		\$ 235,000	\$ 685,000	\$ 505,000	\$ 40,000	\$ 50,000		\$1,515,000	\$59,119	\$ 1,042,710	\$472,290
REDSO Sub Total		\$ 300,000	\$ 315,000	\$ 320,000	\$ 800,000	\$ 725,000	\$ 340,000	\$ 357,000	\$ 3,157,000	\$ 64,067	\$ 2,970,985	\$186,015
WARP Sub Total		\$ -	\$ -	\$ -	\$ 250,000	\$ 340,000	\$ 500,000	\$ 150,000	\$ 1,240,000	\$ 15,058	\$ 971,072	\$268,928
LAC Bureau Sub Total		\$ 195,000	\$ 101,571	\$ 510,000	\$ 780,000	\$ 660,000	\$ 650,000	\$ 600,000	\$ 3,496,571	\$ 83,631	\$ 2,123,487	\$1,373,084
Bureau		\$ 1,035,000	\$ 1,501,571	\$ 2,355,000	\$ 3,385,000	\$ 4,195,000	\$ 2,410,000	\$ 1,827,000	\$ 16,708,571	\$ 457,635	\$ 11,872,564	\$4,836,007
Regional Mission Funds												
MAC Mission Funding												
REDSO FS				\$50,000	\$ 25,000	\$ 175,000	\$ 100,000		\$350,000	\$15,327	\$ 304,610	\$45,390
Democratic Rep. Of Congo FS				\$10,000		\$ 200,000	\$ 100,000		\$310,000	\$21,454	\$ 295,748	\$14,252
Ghana FS				\$125,000	\$ 150,000	\$ 150,000			\$425,000	\$46,269	\$ 345,351	\$79,649
Kenya FS				\$50,000	\$ 84,500	\$ 200,000			\$334,500	\$0	\$ 349,462	(\$14,962)
Madagascar FS					\$ 75,000	\$ 100,000	\$ 150,000		\$325,000	\$19,372	\$ 148,737	\$176,263
Mali FS						\$ 100,000	\$ 125,000		\$225,000	\$32,319	\$ 181,593	\$43,407
Nigeria FS				\$100,000					\$100,000	\$0	\$ 101,763	(\$1,763)
Rwanda FS				\$25,000					\$25,000	\$0	\$ 16,612	\$8,388
Senegal MAARD				\$100,000			\$ 150,000		\$250,000	\$9,795	\$ 242,006	\$7,994
Sudan FS							\$ 400,000		\$400,000	\$111,364	\$ 219,002	\$180,998
WARP FS				\$38,750		\$ 191,250			\$230,000	\$27,577	\$ 230,748	(\$748)
MAC Mission Funding Sub Total		\$ -	\$ -	\$ 498,750	\$ 334,500	\$ 1,116,250	\$ 1,025,000	\$ -	\$ 2,974,500	\$ 283,477	\$ 2,435,631	\$538,869
Albania FS			\$ 300,000		\$ 100,000				\$400,000	\$1,989	\$ 287,547	\$112,453
Armenia FS					\$ 100,000		\$ 500,000	\$ 1,000,000	\$1,500,000	\$125,173	\$ 710,237	\$789,763
Central Asia Regional					\$ 100,000				\$100,000	\$5,564	\$ 94,569	\$5,431
Kazakhstan FS				\$ 50,000					\$50,000	\$0	\$ 53,629	(\$3,629)
Kyrgyzstan FS				\$ 50,000	\$ 50,000				\$100,000	\$2,164	\$ 84,551	\$15,449
Moldova FS				\$ 100,000		\$ 175,000			\$275,000	\$6,919	\$ 242,402	\$32,598
Romania FS				\$ 150,000					\$150,000	\$0	\$ 236,131	(\$86,131)
Tajikistan FS					\$ 50,000				\$50,000	\$2,399	\$ 37,808	\$12,192
Turkmenistan FS			\$ 91,208						\$91,208	\$0	\$ 81,551	\$9,657
Uzbekistan FS			\$ 108,792	\$ 100,000	\$ 100,000				\$308,792	\$2,677	\$ 278,767	\$30,025
Brazil FS				\$ 798,000		\$ 350,000	\$ 250,000	\$ 400,000	\$1,798,000	\$96,580	\$ 1,355,123	\$442,877
Dominican Republic MAARD			\$ 103,389	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 30,000	\$433,389	\$44,428	\$ 340,895	\$92,494
Haiti Sub Total		\$ -	\$ 110,000	\$ 100,000	\$ 1,390,000	\$ 1,950,000	\$ 3,750,000	\$ -	\$ 7,300,000	\$ 634,316	\$ 6,915,990	\$384,010
Honduras Mission FS		\$ 30,000	\$ 50,000						\$80,000	\$0	\$ 58,059	\$21,941
Mexico FS								\$ 49,957	\$49,957	\$24,358	\$ 35,050	\$14,907
Nicaragua FS				\$ 100,000	\$ 150,000	\$ 394,581	\$ 90,000	\$ 50,000	\$784,581	\$18,949	\$ 670,935	\$113,646
Peru Mission FS		\$ 100,000							\$100,000	\$0	\$ 107,017	(\$7,017)
Bangladesh Mission FS		\$ 100,000							\$100,000	\$0	\$ 65,235	\$34,765
Cambodia FS					\$ 150,000		\$ 150,000		\$400,000	\$41,403	\$ 361,765	\$38,235
India FS						\$ 276,000			\$276,000	\$0	\$ -	\$276,000
Nepal FS			\$ 413,000	\$ 300,000					\$713,000	\$0	\$ 704,071	\$8,929
Vietnam FS						\$ 1,000,000	\$ 2,847,000		\$3,847,000	\$111,430	\$ 3,693,562	\$153,438
Angola PMI FS								\$ 100,000	\$100,000	\$41,925	\$ 96,467	\$3,533
Malawi FS									\$0	\$31,074	\$ 31,074	(\$31,074)
Benin MAARD							\$ 50,000		\$50,000	\$4,011	\$ 42,044	\$7,956
Benin-Malaria MAARD							\$ 30,000		\$30,000	\$0	\$ 34,826	(\$4,826)
Ethiopia Sub Total		\$ -	\$ -	\$ -	\$ 3,500,000	\$ 3,000,000	\$ 22,300,000	\$ 7,586,000	\$ 36,386,000	\$ 3,215,284	\$ 26,530,316	\$9,855,684
Kenya Sub Total		\$ -	\$ -	\$ -	\$ 1,737,000	\$ -	\$ 2,194,850	\$ -	\$ 3,931,850	\$ 537,486	\$ 4,757,699	(\$825,849)
Namibia Sub Total		\$ -	\$ -	\$ -	\$ 835,000	\$ 1,177,000	\$ 1,742,100	\$ 1,970,795	\$ 5,724,895	\$ 311,269	\$ 5,235,934	\$488,961
Rwanda Sub Total		\$ -	\$ -	\$ -	\$ 1,600,000	\$ 665,000	\$ 1,938,109	\$ 2,695,465	\$ 6,895,574	\$ 599,812	\$ 5,332,206	\$1,566,368
Senegal MAARD					\$ 150,000	\$ 150,000			\$300,000	\$0	\$ 313,359	(\$13,359)
South Africa Total		\$ -	\$ -	\$ -	\$ 1,000,000	\$ 1,400,000	\$ 2,550,000	\$ 3,600,000	\$ 8,550,000	\$ 409,094	\$ 5,011,831	\$3,538,169
Sudan								\$ 600,000	\$600,000	\$8,183	\$ 8,183	\$591,817
Tanzania Sub Total		\$ -	\$ 1,150,000	\$ 1,440,000	\$ 2,590,000	\$ 392,589	\$ 1,993,266	\$596,734				
Uganda PMI FS								\$ 300,000	\$300,000	\$91,638	\$ 169,613	\$130,387
Uganda - MAC Core FS								\$ 200,000	\$200,000	\$0	\$ 200,000	\$0
Uganda Sub Total		\$ -	\$ 500,000	\$ 500,000	\$ 91,638	\$ 169,613	\$330,387					
Zambia Sub Total		\$ 100,000	\$ 280,000	\$ 780,000	\$ 1,865,000	\$ -	\$ -	\$ -	\$ 3,025,000	\$ 990	\$ 3,019,833	\$5,167
Mission		\$ 330,000	\$ 1,456,389	\$ 2,328,750	\$ 13,909,500	\$ 11,853,831	\$ 40,667,059	\$ 20,022,217	\$ 90,567,746	\$ 7,045,181	\$ 71,427,176	\$19,140,570
ACF Surplus/(Deficit)											\$0	
Grand Total		\$ 3,995,000	\$ 7,984,498	\$ 11,767,030	\$ 24,112,500	\$ 24,136,556	\$ 49,250,569	\$ 27,251,657	\$ 148,497,810	\$ 9,325,019	\$ 116,782,977	\$31,714,833

Rational Pharmaceutical Management Plus Financial Status Overview
Cumulative Expenditure activity through December 31, 2006

Total Funding Received to date:	\$148,497,810
Total Amount Spent to date:	\$116,782,977
Pipeline:	\$31,714,833
Percent of Funds Spent:	78.64%
Cost-Share Earned to Date:	+\$21,000,000
<i>Target Cost-Share Amount:</i>	<i>\$21,000,000</i>
Percent of Cost-Share Realized:	100%+



**Rational Pharmaceutical Management Plus Program
Expenditures through December 31, 2006**



RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Mainstreaming Initiative **Year** 05**Activity Title** General technical assistance/tool development and dissemination**Activity Manager** Citysoft Admin **Activity #** 2 **Task:** A1WW05MNS **Sub-Task:** 60AXH2**Activity Description** Through this activity code, RPM Plus will avail itself to opportunities to discuss with USAID NEPs, PVO's, and other relevant entities the importance of measuring health system performance, having a systematic approach to measurement and thinking through results through to recommendations. It will also contribute to activities that promote the use of existing proven tools and methods for addressing basic health system issues.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Discussions initiated with USAID on holding a technical seminar to launch the Mainstreaming Initiative Health Systems Assessment Tool within the context of "best practices".		Obtain approval from USAID and get other partner buy-in.		

Last Updated: 01/26/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Maternal Health**Year** 04**Activity Title** Collaborate with partners to analyze STGs for AMSTL and PPH and explore the potential for their harmonization and eventually**Activity Manager** Ndyanabangi, Bannet**Activity #** 2**Task:** A1WW04RPH**Sub-Task:** 60BXH2

Activity Description One of the intermediate results (IR) for this project is to increase the use of AMSTL for the prevention of PPH. In order to support this IR, and to support this PPH prevention initiative, RPM Plus proposes to a study in 4-5 countries to identify issues at the central level that might negatively affect the quality of services at the facility level, looking specifically at—

- Factors affecting the widespread availability of uterotonics in health facilities
- Training initiatives to ensure that staff are well trained in AMTSL and the storage requirements for uterotonics
- Systems to ensure quality products, maintained through a secure distribution chain. Areas for possible harmonization of AMTSL training as well as the supply and storage procedures for uterotonics to support the adoption and scale-up of AMTSL in several countries were also identified.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

The study was finalized in English and French and distributed to USAID Missions and Ministries of Health in Benin, Burkina Faso, Cameroon and Mali. The study was also presented in November at the XVIII FIGO World Congress of Gynecology and Obstetrics in Kuala Lumpur, Malaysia.

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Maternal Health **Year** 04**Activity Title** Adapt Survey tools to be used by sub grantees under the POPPHI framework to assess current drug mgmt. practice and the capacity**Activity Manager** McCollum, Jennifer **Activity #** 3 **Task:** A1WW04RPH **Sub-Task:** 60CXH3**Activity Description** RPM Plus will adapt tools so that they can be quickly administered locally, and will focus on aspects of the drug management cycle. RPM plus will support the subgrantees as appropriate in carrying out the surveys and dissemination of the findings to policy makers.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Data Collection for AMTSL Study in Benin was completed in November. RPM Plus consultant attended data analysis workshop in mid-December in Baltimore.		Findings and report expected by February. Plans for dissemination workshop will involve MoH, POPPHI and URC bilateral in Benin, in addition to other partners providing MCH services. Waiting to hear on next activities in Mali. RPM Plus hopes to participate in stakeholders meeting in early 2007.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Maternal Health **Year** 05**Activity Title** Technical activity coordination and monitoring**Activity Manager** Ndyanabangi, Bannet **Activity #** 1 **Task:** A1WW05RPH **Sub-Task:** 97XXY1**Activity Description** This activity includes technical activity coordination, work plan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators.

This activity will take place throughout the year.

**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Participated in Reproductive Health Procurement ToolKit Development meeting hosted by PATH/DC, December 5th, 2006. Attended the Uterotonic Drugs and Devices (UDD)Task Force Meeting, Dec 15, 2006.				
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Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Maternal Health **Year** 05**Activity Title** Develop and implement advocacy strategies to promote inclusion of AMTSL in national RH policies in African countries in**Activity Manager** Ndyanabangi, Bannet **Activity #** 2 **Task:** A1WW05RPH **Sub-Task:** 60F5H2**Activity Description** From the results of a review of national policies and standard treatment guidelines initiated in 2004 and currently in progress in selected AWARE countries, and also from information obtained from a POPPHI global survey of AMTSL practices also currently underway, advocacy materials, such as policy briefs and fact sheets will be developed to promote the inclusion of AMTSL in STGs and other national policies.

RPM Plus will also participate in national and regional workshops and conferences to present pharmaceutical management issues in the practice of AMTSL.

This activity will take place throughout the year as opportunities are identified in coordination with POPPHI partners.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus submitted an abstract for the December, 2006 SAGO (African Association of Obstetricians and Gynecologists) conference. In November, RPM Plus attended the XVIII FIGO World Congress of Gynecology and Obstetrics in Kuala Lumpur, Malaysia. Findings from four country study on policies and procedures for the use of uterotonics for active management of the third stage of labor (AMTSL) were presented in collaboration with findings from POPPHI Studies on current AMTSL practices in Tanzania and Ethiopia.	RPM Plus had hoped to present the same findings at the SAGO conference in December. However, the conference was postponed.			

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Maternal Health **Year** 05**Activity Title** Provide technical assistance on pharmaceutical management components of the POPPHI Global Survey.**Activity Manager** McCollum, Jennifer **Activity #** 3 **Task:** A1WW05RPH **Sub-Task:** 60F5H3**Activity Description** Continuing collaboration with POPPHI partners, RPM Plus will continue to support the POPPHI Global Survey of current AMTSL practices in West Africa. Through this process, RPM Plus will identify potential areas for technical assistance to improve the availability and management of uterotonics. This activity will take place throughout the year.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	In early December, RPM Plus met with Ghana Health Services (GHS), USAID and partners to prepare for POPPHI AMTSL Study in Ghana. Data collection in Benin was completed. RPM Plus Consultant for Benin study attended data analysis workshop in Baltimore in mid-December.		GHS to send recommendations for study coordinator, hospital delivery data and information on when the national ethical review board meets in this quarter. AMTSL Study findings from Benin expected by end January 07.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 01**Activity Title** Produce a DMCI training materials package.**Activity Manager** Adeya, Grace**Activity #** 3**Task:** A1WW01CHS**Sub-Task:** 60F6E3**Activity Description** RPM Plus will design a curriculum and produce a package of materials to guide the training of data collectors and to facilitate the role of the trainer. The materials will enhance the continuity and sustainability of the application of DMCI.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus is awaiting final revision to the DMCI tool before producing a draft curriculum package.		RPM Plus will draft a curriculum package and incorporate any revisions made to the DMCI tool.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival**Year** 03**Activity Title** Developing interventions guide to improve child survival drug management at community level**Activity Manager** Adeya, Grace**Activity #** 3**Task:** A1WW03CHS**Sub-Task:** 60F6K3**Activity Description** A guide to interventions is being developed in order to orient district managers as well as policy makers, in the selection and development of interventions to improve availability and use of medicines in the community.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter RPM Plus integrated comments from an internal MSH review into a revised version of the interventions guide and submitted the revised version to Harvard for final review.		World Health Organization staff will review the revised guide (after Harvard integrates final comments) and the guide will be finalized. A suitable country will be identified to pilot the interventions guide once it is completed, possibly Madagascar.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival**Year** 03**Activity Title** Dissemination of tools**Activity Manager** Adeya, Grace**Activity #** 5 **Task:** A1WW03CHS **Sub-Task:** 60G2D5**Activity Description** Translate the C-DMCI tool into French to increase its potential use in French-speaking countries. Disseminate all the tools, as well as assessment results, through meetings and networks. Use the RPM Plus website to post reports of assessments and descriptions of the tools with contact information from which to obtain CD ROMs of the tools. Start to adapt the existing DMCI analysis software package from EPI-info into Access, which is easier to use and more readily available and will also include capabilities to analyze the C-DMCI survey data.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter additional comments were given by RPM Plus and the consultant responsible for the completion of the analysis database and indicator reports for the C-DMCI assessment tool continued with revisions (completion is expected next quarter). In addition to ongoing work with the database, RPM Plus collaborated with MSH Center for Health Outcomes to update the internal MSH Child Survival webpage with relevant reference materials related to child health and pharmaceutical management. RPM Plus also wrote and submitted an abstract based on DMCI experience to the Global Health Council Conference.		RPM Plus will coordinate with the consultant to finalize the software and user manual for C-DMCI analysis. A Child Survival brochure will be finalized for dissemination at conferences and meetings. The RPM Plus child survival web pages will continue to be updated as necessary on a quarterly basis. A final draft of the BASICS RPM Plus action guide on drug management will be completed and published. Also, an abstract based on C-DMCI experience will be submitted to annual American Public Health Association conference.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Child Survival**Year** 03**Activity Title** Implement community drug management interventions in the LAC region**Activity Manager** Adeya, Grace**Activity #** 7 **Task:** A1WW03CHS **Sub-Task:** 60F6H7

Activity Description RPM Plus will follow up on the C-DMCI assessment conducted in Peru in 2003 with a strategy planning workshop to assist program planners in the country to select and develop appropriate interventions to improve community drug management for childhood illnesses. After the selection of appropriate interventions, RPM Plus will continue to work with partners in country and provide technical assistance to guide the development, planning and implementation of the interventions, through, for example, the provision of training materials and sharing of tools and experiences from other countries.

RPM Plus has been requested by PAHO to provide technical assistance to their program of PMTCT/IMCI integrated activities in Latin America. In collaboration with PAHO, specific activities will be determined from these proposals and technical assistance provided by RPM Plus where necessary.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, revisions on the English translation of the Peru C-DMCI report have been on hold due to conflicting priorities.		RPM Plus will complete the English translation of the Peru C-DMCI report and disseminate to partners and stakeholders, where appropriate (the Spanish version has already been disseminated).		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 04**Activity Title** Technical activity coordination and monitoring**Activity Manager** Adeya, Grace**Activity #** 1**Task:** A1WW04CHS**Sub-Task:** 97XXY1**Activity Description** n/a

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter standardized monthly and quarterly reporting of child survival activities continued.				

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 04**Activity Title** Implement private sector initiatives in Tanzania.**Activity Manager** Adeya, Grace **Activity #** 3 **Task:** A1WW04CHS **Sub-Task:** 60AXH3**Activity Description** RPM will provide technical assistance to improve access to child health medicines in intervention areas through community mobilization and improved service delivery through the private sector. Activities will include implementation of a package of interventions focusing on child health as part of the ADDO program in Tanzania. Core funds will also be used to support a Mission funded activity in Senegal, working with sales assistants of private pharmacies.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter private sector initiatives in child health advanced in Tanzania and Senegal. All Tanzania activities are reported under A1 WW05CHS 60A2H2. In Senegal, the draft of the final report on all 11 of the private sales assistant trainings was reviewed by RPM Plus and comments sent for integration into the final report.		In Senegal, a final report summarizing results from the training of private sector sales assistants will be completed and disseminated. In addition to Senegal activities, the systematic review of private sector interventions will be finalized and the final report of findings of the Kenya evaluation with the Strategies for Enhancing Access to Medicines (SEAM) team will be submitted to editing for final review.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 04**Activity Title** Develop drug management training in support of IMCI**Activity Manager** Adeya, Grace**Activity #** 4**Task:** A1WW04CHS**Sub-Task:** 60F6M4**Activity Description** Improve availability and use of drugs for child health in areas where IMCI is implemented.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, development of the pharmaceutical management training for child survival has not advanced due to conflicting priorities.		RPM Plus will develop an outline for a course on pharmaceutical management for child survival and complete the D-DMCI.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Child Survival**Year** 04**Activity Title** Global advocacy for pharmaceutical management in child survival programs**Activity Manager** Adeya, Grace**Activity #** 6**Task:** A1WW04CHS**Sub-Task:** 60GXD6**Activity Description** Promote pharmaceutical management for child health as an item on international agendas.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, MSH submitted the appropriate documentation to register as an official Partnership for Maternal, Newborn and Child Health (PMNCH) partner.		RPM Plus will continue to explore their role as a partner in the PMNCH. Follow up will continue on collaboration with PMNCH working groups.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 04**Activity Title** Mainstreaming health systems strengthening**Activity Manager** Briggs, Jane**Activity #** 8 **Task:** A1WW04CHS **Sub-Task:** 60AXH8**Activity Description** n/a

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter RPM Plus continued discussion with the Save the Children team and the CORE group regarding the technical assistance needed to support the CCM expansion and institutionalization in the boticas comunales (communal pharmacies in remote communities). Through these discussions it was determined that technical assistance by RPM Plus would not be possible using funds from the South American Infection Disease Initiative (SAIDI). Due to this funding limitation, technical assistance from RPM Plus will be minimal and will be provided solely through the SO3 portfolio. As part of the technical assistance, RPM Plus reviewed and commented on data collection instruments to be used in a situational analysis by the Save the Children team.		RPM Plus will continue to provide technical assistance to the boticas comunales program and the Save the Children team in Bolivia as appropriate, including the review of materials.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 05**Activity Title** Technical activity coordination and monitoring**Activity Manager** Adeya, Grace **Activity #** 1 **Task:** A1WW05CHS **Sub-Task:** 97XXY1**Activity Description** This activity includes technical activity coordination, workplan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter RPM Plus finalized the FY 06 workplan and submitted it to USAID for review.		RPM Plus will follow up with USAID on the review of the FY 06 workplan and receive feedback.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival **Year** 05**Activity Title** Private sector initiates - Tanzania**Activity Manager** Adeya, Grace **Activity #** 2 **Task:** A1WW05CHS **Sub-Task:** 60A2H2**Activity Description** RPM Plus will work with partners to implement a package of interventions focused on child health as part of the Accredited Drug Dispensing Outlet (ADDO) program in Tanzania. The package consists of community demand creation, capacity building to improve quality of care provided at outlets, oversight and regulation and monitoring and evaluation. RPM Plus will work with the BASICS project on the implementation of this package. The child health package (IMCI in the ADDOs), once it has been developed and evaluated, will be incorporated into the national ADDO program.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Child Survival**Year** 05**Activity Title** Private sector initiates - Tanzania**Project
Year 7 Q1**

This quarter private sector activities to implement the child health component in the ADDOs (IMCI in the ADDOs) advanced in Tanzania. The draft reports for the baseline quantitative and formative research were submitted by the Centre for Enhancement of Effective Malaria Interventions (CEEMI) and contents were reviewed by BASICS and RPM Plus. A revised version of the reports, incorporating comments from RPM Plus and BASICS, were developed and circulated for review. The contract between BASICS and CEEMI was extended through January 2007. Grace Adeya from RPM Plus traveled to Tanzania (Oct 31 – Nov 11, 2006) to provide technical support and participate in the coordination and implementation of ADDO child health training and to meet with CEEMI officials regarding survey activities and report writing. In preparation for the trainings in Ruvuma on child health in the ADDOs, a three day Training-of-Trainers was held to form 22 trainers (5 from the national level, 2 from the regional level and 15 from the district level) to facilitate future training sessions. In November, a total of 302 ADDO dispensers were trained in child health in the 5 districts of the Ruvuma region. Follow up visits were conducted with recently trained ADDO dispensers to evaluate skills learned and changed practices. As part of the child health package, 280 referral books were printed and distributed to ADDO dispensers in Ruvuma.

In Tanzania, the final reports of the analysis of the baseline assessment and formative research will be completed and disseminated. The training materials will be translated into English from Swahili. A supervision mechanism will be developed. The entire child health package will be incorporated into the ADDO program. RPM Plus will continue to support the TFDA in strategic planning for the national roll-out of ADDOs.

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Child Survival**Year** 05**Activity Title** Private Sector Initiatives**Activity Manager** Adeya, Grace**Activity #** 3**Task:** A1WW05CHS**Sub-Task:** 60A2H3

Activity Description RPM Plus will collaborate with BASICS, leveraging funds from BASICS and other projects in Rwanda such as Twubakane (the bilateral project), to explore the potential role of the private sector in Rwanda through an assessment and a process of options analysis and strategic planning. Also, technical assistance will be provided where necessary on a regional or global level to partnering public health organizations (such as the SARA project, WHO, UNICEF and the World Bank) in order to promote utilization of the private sector for child health as well as to provide guidance to countries.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Child Survival**Year** 05**Activity Title** Private Sector Initiatives**Project
Year 7 Q1**

This quarter, the home-based management of malaria (HMM) assessment was completed in collaboration with BASICS and the national malaria program. Jane Briggs and Katie Senauer traveled to Rwanda (Oct 26 – Nov 11, 2006) to lead the pharmaceutical management and private sector components of the HMM assessment. A trip report was completed and submitted to USAID. Data collection instruments were drafted, shared with partners, field-tested, revised accordingly and finalized. A three day training was held to form 16 data collectors and field-test data collection instruments. Data was collected from five districts (5 district pharmacies, 21 health centers, 29 distributeurs, 5 dispensaries, 21 comptoir pharmaceutiques, 23 simulated purchases) and a preliminary analysis was conducted in-country. A preliminary presentation was made to the national malaria program and other stakeholders in-country to present initial results and recommendations before a formal final presentation in Jan 2007. A draft of the final assessment report was completed and submitted to the national malaria program for review.

RPM Plus will work with other team members to finalize the assessment report. The final results will be formally presented to the Ministry of Health and other stakeholders in Rwanda (scheduled for Jan 18, 2007).

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival**Year** 05**Activity Title** Community case management of ARI and malaria**Activity Manager** Adeya, Grace**Activity #** 5**Task:** A1WW05CHS**Sub-Task:** 60EXH5**Activity Description** Technical assistance will be provided as necessary to partners including expected input in the program design, development of training materials for the training of community agents, the organization of medicine distribution systems, monitoring and supervision, as well as evaluation and documentation.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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This quarter the DRC report on the baseline C-DMCI survey was completed and submitted to editing. The results of the report were disseminated during a three day workshop in Kinshasa (27-29 Dec) and participants discussed recommendations and next steps. Participants included representatives from the Ministry of Health, WHO, UNICEF, BASICS and local NGOs. The RPM Plus DRC team collaborated with local partners to draft an article based on the CCM experience to submit to the WHO Bulletin. In addition, a first draft of a CCM guide was developed and circulated for review with plans to disseminate the final guide at a workshop of stakeholders.

In addition to in-country activities, a second draft of the chapter for the CCM Essentials Guide was developed inline with reviewer comments and chapter objectives and key recommendations were written and shared with the editors. RPM Plus also attended the second author's meeting in Washington DC (Oct 30-31) and discussed outstanding concerns and revisions with other authors and reviewers.

In DRC, the baseline C-DMCI survey report will be finalized and shared with local stakeholders. RPM Plus will continue to support the roll-out of CCM and provide technical assistance to other implementing partners where necessary. The CCM Management of Medicines chapter will be revised according to reviewer comments and finalized for integration into the CCM Essentials Guide. Discussion will continue with USAID on CCM activities in other interested countries.

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival**Year** 05**Activity Title** TA to support the roll-out of zinc treatment for diarrhea management**Activity Manager** Adeya, Grace**Activity #** 6**Task:** A1WW05CHS**Sub-Task:** 60BXH6

Activity Description RPM Plus will technical support the introduction of treatment of diarrhea with zinc as necessary. The technical assistance will be in the form of developing and revising global and national guidelines and other guidance documents or the implementation of zinc treatment, review of job aides globally and nationally for health care workers in the public and private sector, and participating in the development of a generic assessment tool for the feasibility of introduction of zinc.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, RPM Plus supported activities to roll out zinc treatment nationally in DRC. RPM Plus held discussions with the USAID Mission to clarify expectations and RPM Plus involvement in activities. RPM Plus participated during three zinc meetings (Nov 9th, Nov 24th and Dec 14th, 2006) with other interested partners including WHO, AXxes (the bilateral), BASICS, Ministry of Health and Helen Keller International. RPM Plus will provide technical assistance for aspects of national roll-out of zinc treatment specifically related to pharmaceutical management, including the review of materials and assessment tools. In addition to specific country activities, RPM Plus responded to inquiries from the manufacturer Nutriset regarding pharmaceutical management issues related to zinc treatment.		In DRC, RPM Plus will continue to provide technical assistance for aspects of the national roll-out of zinc treatment related to pharmaceutical management, including input into data collection tools and plans for a situational analysis. In addition to country activities, RPM Plus will continue to follow up and support Nutriset in pharmaceutical management aspects of zinc treatment.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Child Survival**Year** 05**Activity Title** Assist BASICS in the roll-out of zinc in Madagascar**Activity Manager** Adeya, Grace**Activity #** 7 **Task:** A1WW05CHS **Sub-Task:** 60BXH7**Activity Description** As Madagascar is planning on implementing a community case management program for diarrhea (including zinc treatment) as well as ARI and malaria, a baseline survey is proposed, using an adapted version of the C-DMCI, to collect information on current drug use practices of facilities and the community, leveraging funds from BASICS & the RPM Plus malaria portfolio.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, RPM Plus discussed potential child health activities and country needs with the USAID Madagascar Mission. Based on these discussions, a child health component will be integrated into an assessment to analyze and determine the current availability of pharmaceutical products used for the management of malaria and subsequently develop a national procurement and distribution plan for the next two years (funded through MAC). The assessment will occur next quarter. Discussions were also held with BASICS to discuss collaboration and synergy of ongoing activities in country.		RPM Plus will conduct an assessment (scheduled for February 2007) of the existing stock of pharmaceutical products used for the management of malaria and other childhood illnesses, funded primarily through MAC. During the assessment trip, RPM Plus will coordinate with the child health team in country and BASICS to discuss activity plans and points of collaboration.		

Last Updated: 01/24/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: HIV/AIDS**Year** 04**Activity Title** Review Literature and Develop paper for HIV/TB Commodities Integration**Activity Manager** Witt, Hella**Activity #** 6**Task:** A1WW04HIV**Sub-Task:** 60F3G6

Activity Description The activity will investigate the process made to date in pharmaceutical management related to TB/HIV collaboration and develop consensus on the critical issues and activities needed to strengthen the collaboration. The issue of strengthening collaboration between the programs will be addressed in a study conducted by RPM Plus TB and HIV teams with funding from the SO4 and SO5 FY04 portfolio. A desk review will be conducted to determine the status of policies, guidelines, and programs of HIV/AIDS TB collaboration in management of pharmaceuticals and other health commodities in different countries. The report will also document models of promising practices for dissemination as case studies.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Phase 2 studies from Ethiopia and Malawi were received and the analysis for Ethiopia completed. Writing of the case study and country report for Ethiopia is ongoing. Analysis of second phase findings from Malawi has started. Draft summary case study reports for Uganda, Tanzania and Kenya have been completed.		Analysis of second phase study from Malawi and preparation of country case studies		

Last Updated: 12/28/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: HIV/AIDS**Year** 04**Activity Title** Present and Disseminate Materials at Workshops, Conferences and Meetings**Activity Manager** Ndyanabangi, Bannet**Activity #** 8**Task:** A1WW04HIV**Sub-Task:** 60F2D8

Activity Description With FY05 funding, RPM Plus will work on actively disseminating these materials using a variety of approaches and media channels. This funding will also be used to present and disseminate materials on RPM Plus products and experiences in strengthening pharmaceutical management systems at conferences and meetings. RPM Plus will send representatives to the ICASA conference in 2005 to present abstracts, participate in satellite sessions and to disseminate tools and materials as appropriate. RPM Plus will work with OHA to identify other opportunities and appropriate topics to present at workshops, conferences and meetings

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The abstract submitted last quarter for the IAPAC conference to be held in March 2007. Preliminary work began on compiling the data for the conference in order to prepare the poster presentation	None	Work will continue on the preparation of the presentation for IAPAC.		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** HIV/AIDS**Year** 05**Activity Title** Work with USAID, the World Bank, the World Health Organisation, the Global Fund for AIDS, TB and Malaria (GFATM) and other**Activity Manager** Ndyanabangi, Bannet**Activity #** 4**Task:** A1WW05HIV**Sub-Task:** 60F2H4**Activity Description** RPM Plus will continue to work with USAID/OHA in collaborating with international agencies including UNAIDS WHO,GFATM, the World Bank and other donors and organizations to exchange information related to HIV/AIDS health commodity management and to identify opportunities for collaboration to address health commodity management issues. These may include collaborating on assessments, follow-on health commodity management technical assistance and training and assisting countries to scale-up activities.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

During this quarter, RPM Plus facilitated a course for representatives of Ethiopia, Kenya and Tanzania on Managing Procurement and Logistics of HIV/AIDS drugs and related supplies. The course was held in Arusha, Tanzania

Last Updated: 01/03/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: HIV/AIDS**Year** 05**Activity Title** Finalize and disseminate pharmaceutical management training materials for HIV/AIDS treatment and care**Activity Manager** Maalaoui, Noura**Activity #** 5**Task:** A1WW05HIV**Sub-Task:** 60GXE5**Activity Description** The materials have been pre-tested and used for training in Kenya. In 2006, these materials will be finalized and printed for dissemination to more countries who require this service in their HIV treatment programs.
HIV/AIDS pharmaceutical management training materials will be finalized, edited, printed and availed for use in country programs.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

During this quarter the power point presentations in the training materials manual was updated in line with the new WHO guidelines issued in August 2006. In addition, the pre- and post- field testing questions for the Belize activity were revised and updated

None

Last Updated: 12/19/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** HIV/AIDS**Year** 05**Activity Title** Promoting operations research to improve adherence to ARVs - pre-testing the mapping tool to enhance adherence to ART in at least**Activity Manager** Witt, Hella**Activity #** 6**Task:** A1WW05HIV**Sub-Task:** 60EXC6**Activity Description** A mapping tool previously used to promote adherence to anti-TB treatment is being adapted to promote adherence to ART. This tool will be pre-tested in at least two countries where RPM Plus has a presence as part of promoting adherence to ART.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
The adaptation of the 'Adherence Promotion Planning Tool' from the 'Motivations Mapping Tool' was completed. The first technical review is ongoing.		The adaptation of the 'Adherence Promotion Planning Tool' from the 'Motivations Mapping Tool' was completed. The first technical review is ongoing.		

Last Updated: 01/02/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** HIV/AIDS**Year** 05**Activity Title** Finalize and disseminate laboratory service training materials for HIV/AIDS treatment and care**Activity Manager** Mundy, Catherine**Activity #** 7**Task:** A1WW05HIV**Sub-Task:** 60DXE7**Activity Description** The materials still need to be finalized and be pre-tested before printing them for wider use in other country programs.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No progress reported		The materials will be pilot-tested in Kenya during the next quarter		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** HIV/AIDS**Year** 05**Activity Title** Updating the Rapid HIV test kits procurement information document**Activity Manager** Johnson, Abiola**Activity #** 8**Task:** A1WW05HIV**Sub-Task:** 60AXF8**Activity Description** RPM Plus will use funds from FY06 to update the document to reflect changes in supplier and price information. The document was web-enabled using FY04 funds and this will be updated to reflect any further changes.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The document was updated with technical and procurement information for the HIV test kits. Two additional HIV test kits were included to the waiver list. A meeting was held with USAID in order to go over the process and underline the requirements of the document. Discussions commenced with the web team at MSH to develop CD versions of the information document and also to update the web version	None	The hard copy version of the document will be finalized. Work on the CDs and updating the web version will continue in the next quarter		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** HIV/AIDS**Year** 05**Activity Title** Update the VCT Planning Guide**Activity Manager** Walkowiak, Helena**Activity #** 10**Task:** A1WW05HIV**Sub-Task:** 60EXE0**Activity Description** Originally planned using FY03 funding, the review and update of the document is now being done in FY05. The aim of the document is to provide practical guidance on commodity management issues related to establishing, managing and scaling up testing and counseling programs. The document will be completed and disseminated.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus field staff were interviewed in Ethiopia and Zambia to solicit information on tools and methodologies developed and in use for VCT commodity management, lessons learned and to identify potential case studies. RPM Plus completed the first draft of the updated document in this quarter.	None	The document will be reviewed by colleagues and partners in the next quarter.		Last Updated: 12/12/2006
Project Year 7 Q1					Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Antimicrobial Resistance**Year** 05**Activity Title** Pilot the AMR Questionnaire Module for Use by the Demographic and Household Survey (DHS)**Activity Manager** Joshi, Mohan**Activity #** 4**Task:** A1WW05AMR**Sub-Task:** 60F1C4

Activity Description Planned activity: With FY04 funds, RPM Plus collaborated with ORC Macro to develop a draft "AMR Module" to specifically address community knowledge/use of antibiotics and awareness of drug resistance. The draft set contains introduction, indicators, questionnaire, rationale, and tabulation plan. The draft module is now ready for review by global experts and pilot testing.

Proposed approach: The draft module will be sent to global and national experts with experience in AMR, antibiotic use, and operational research. Based on the feedback obtained from the experts, RPM Plus and ORC Macro will revise the draft and also convene a meeting of core group of experts to further review and finalize the draft in order to make it ready for pre-testing.

The main task under this current work plan will be to pre-test the module in one resource-constrained country. RPM Plus and ORC Macro will collaborate to provide support for the in-country pre-test. The pre-test will be conducted as a critical means of testing:

-the wording of the questions, the skip patterns, and the filters in the module

-the feasibility of attaching 'current medication use' to household questionnaire in order to capture more people (non-reproductive age) using medications; and

-the accuracy of translation if the pretest is conducted in a language different from English

The results of the pretest will inform decision on whether and what revisions are required in the draft module. The pretest will also serve as the basis for development and revision of the interviewer's manual.

In addition, RPM Plus and ORC Macro will continue the work initiated in FY04 with regard to identification of a few AMR-related indicators and questions for the facility-based Service Provision Assessment (SPA) tools. The two partners will collaborate to facilitate efforts at getting the DHS consider incorporation of these suggestions in their SPA modules.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance**Year** 05**Activity Title** Pilot the AMR Questionnaire Module for Use by the Demographic and Household Survey (DHS)**Project
Year 7 Q1**

- Coordination between MSH and ORC Macro finance units led to finalization of content of the ORC Macro contract. MSH sent signed copy of the contract to ORC Macro.
- CSO, which has been identified as the potential local collaborating partner for field test of the AMR Module, was contacted several times through ORC Macro with a list of questions seeking clarification regarding their proposed budget.
- In December, RPM Plus technical staff discussed technical and logistical details of the field test with Adrienne Cox and Ani Hyslop at ORC Macro Office.

- Delays in hearing back from CSO in Zambia.

- The immediate next step planned is to try and hold a conference call between RPM Plus, ORC Macro, and CSO to finalize the details of CSO collaboration.

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Technical Activity Monitoring and Coordination**Activity Manager** Joshi, Mohan **Activity #** 1 **Task:** A1WW06AMR **Sub-Task:** 97XXY1**Activity Description** This activity includes technical activity coordination, work plan development, budget monitoring, progress monitoring, meetings, and communications with partners and collaborators. It will also include updating of the RPM Plus Strategic Monitoring System (SMS) with quarterly progress reports and the MSH/RPM Plus AMR website.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">- FY06 (Year 7) AMR workplan drafted, reviewed, revised, finalized, and placed in the G: drive.- Codes for most of the activities opened.- Communications with in-country partners in Ethiopia, Zambia, Tanzania, South Africa and Namibia continued to support progress on various activities.- A substantial updating of the MSH/RPM Plus AMR website planned. First draft for most the activities done.- All the codes for FY03 closed. Two FY05 codes (technical activity coordination and DTC) also closed.- APUA contacted with request for a revised workplan and budget based on the figures indicated in RPM Plus' FY06 AMR workplan.		<ul style="list-style-type: none">- Close all the FY05 codes in January 2007.- Finalize revision of AMR website, obtain approval and change the website content.		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Implement a country-level AMR advocacy and containment program**Activity Manager** Goredema, Wonder **Activity #** 2 **Task:** A1WW06AMR **Sub-Task:** 60AXP2**Activity Description** In FY06 activities in Zambia will be further advanced. In Ethiopia, recommendations generated at the November 2006 Call to Action Workshop in Adama will be utilized to strategize further AMR containment and advocacy activities. Drawing from the ongoing experiences in Zambia and Ethiopia, the approach will be initiated in a third country.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<p>- The Ethiopian AMR Task Force and DACA held an AMR Stakeholders' Call to Action Workshop, attended by 65 participants from various sectors, November 16-18, 2006 in Adama,. RPM Plus provided technical assistance in planning and facilitating the workshop and attended the workshop and delivered relevant presentations, including sharing the AWG experience in Zambia. The theme of the workshop was "Preserving Efficacy of Antimicrobial Drugs in Ethiopia". The objectives of the workshop were to 1) promote the awareness of all stakeholders on the situation of AMR in Ethiopia, 2) familiarize and promote the Role o AMRAC in advocating for the containment of AMR, and 3) prioritize problems and propose actions to be taken by stakeholders. The output of the workshop was a call to action declaration which pledged the commitment of the MoH, DACA, and the stakeholder in attendance to address AMR by acting on the recommendations discussed and agreed upon at the workshop.</p> <p>- During this quarter work continued in Zambia to consolidate the STGs that were reviewed at the September retreat.</p>	None	<p>- Finalize reviewing the STGs in Zambia</p> <p>- DACA to send Adama Declaration (developed during the November AMR call-to-action workshop in Adama,Ethiopia) and consolidated recommendations from all the four groups of the workshop to all the workshop participants and the chiefs of the organizations they represented.</p> <p>- Local stakeholders to conduct a base-line survey in Ethiopia on factors impacting AMR.</p> <p>- AMR Task Force to devleop National Program of AMR containment in Ethiopia.</p>		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Finalize and distribute AMR country-level approach workbook**Activity Manager** Joshi, Mohan **Activity #** 3 **Task:** A1WW05AMR **Sub-Task:** 60F1F3**Activity Description** The planning and implementation experiences in Zambia and Ethiopia are yielding several lessons that will be of much practical value to add to the workbook. So the plan is to further revise the workbook incorporating experiences and lessons learned in Zambia and Ethiopia as work continues in those countries. Under this workplan the workbook will be revised and finalized by RPM Plus in collaboration with country partners and made available for guidance in initiating the approach by additional interested countries.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">- Revisions to the organization of the existing draft are being considered in light of experiences and lessons learned in implementation of the containment and advocacy program in Zambia and Ethiopia.- Outline of Chapter 5 (Implement) and Chapter 6 (Monitor/Evaluate) was drafted.- Literature search to identify documents that could assist in the revision process continued.- Putting together a preliminary draft of Chapter 5 and 6 has started.	None	<ul style="list-style-type: none">- Finish Chapter 5 and 6 drafts.- Further refine the whole workbook based on continuing Zambia and Ethiopia implementation experiences.		

Last Updated: 12/22/2006

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Provide sustained follow-up technical support to DTC-TOT participants to enable them to implement their work plans**Project
Year 7 Q1**

- Follow-up communication and support to Malaysia DTC course participants continued. RPM Plus technical staff provided technical inputs to Sital Shah (Kenya) on how to conduct formulary management trainings. An e-room was established to facilitate document exchange and posting of draft versions of formulary data, prescribing indicators, etc. A success story describing Sital Shah's achievement was posted on the DTC website at <http://erc.msh.org/dtc>.

- Thuli Sibiya of Swaziland organized a DTC training for four hospitals in collaboration with RPM Plus/South Africa. After the 2 day sensitization workshop on DTCs and customer relations that was organized by Halima (Nigeria) in August 2006, follow up was conducted in some public hospitals in Abuja. Halima sent two of her staff to monitor progress in implementing DTCs.

- In November, RPM Plus technical staff discussed the progress made by Patrick on his Drug Use Evaluation (DUE) project for caesarean section prophylaxis at Mater Hospital, Nairobi. Feedback on his DUE methodology, data analysis, stakeholder involvement, endorsement by his DTC and next steps were provided. An excel template calculating direct and indirect costs for the C-section DUE was developed by RPM Plus and sent to Patrick.

- Follow-up support was provided to Fikru Worku and Dr. Tsinuel Girma of Jimma University Specialized Hospital, Jimma, Ethiopia. In response to their request to review their internal training schedule, RPM Plus provided feedback and suggestions for their 3 day training. RPM Plus also provided technical

Email or phone communications with some of the participants yield no response. Only a few participants actively respond to RPM plus messages.

- Continue long distance (phone, email, mail) follow-up technical assistance.

- Organize an orientation workshop for RPM Plus/Ethiopia field staff and the Regional Health Bureau pharmacists of all the 11 Regions of Ethiopia in February 2007 on operationalizing the recent DTC and AMR activities initiated in Ethiopia. The AMR portofolio will provide technical support and send two staff to Ethiopia to facilitate this workshop.

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Provide sustained follow-up technical support to DTC-TOT participants to enable them to implement their work plans

information on DUE methodology. A success story describing Jimma Hospital's rapid establishment of their functional DTC was developed and posted on the DTC website at <http://erc.msh.org/dtc>. RPM Plus requested Drug Administration and Control Authority (DACA) of Ethiopia to mail the hard copies of the success story to all 40 Ethiopian National DTC course participants as most of them have limited access to the internet.

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Antimicrobial Resistance**Year** 06**Activity Title** Help strengthen quality assurance of selected antimicrobials through a regional approach**Activity Manager** Tran, Dat**Activity #** 7**Task:** A1WW05AMR**Sub-Task:** 69DXH7

Activity Description The process of validating level two TLC/densitometry as a methodology to effectively assess the quality of additional antimicrobials, particularly antiretrovirals (ARVs) which was initiated in Tanzania in FY05 will be completed in FY06. Also the program initiated in Zambia to roll out the Tanzania model of Level One Drug Inspection and Minilab testing will be further advanced. In addition to focusing on product quality, the AMR portfolio of RPM Plus will also explore opportunities to further collaborate with PMI to strengthen pharmacovigilance of antimalarials in Tanzania to support a broader QA system. The AMR and malaria portfolios will also collaborate to organize a regional consultative meeting on the quality of antimalarials with the goal of forging a practical regional approach to assist all countries improve their quality assurance systems for antimalarials and antimicrobials at large.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Help strengthen quality assurance of selected antimicrobials through a regional approach**Project
Year 7 Q1**

None

- SOP developed by RPM Plus to assist the Zambia Pharmaceutical Regulatory Authority (PRA) in training port of entry inspectors on i) document verification ii) physical/visual inspection (packaging/labeling) and iii) product testing using Minilab kits has been finalized and approved by PRA/MOH of Zambia to be used in the training, planned for mid January 2007.
- RPM Plus continues to provide TA and support to TFDA on validating testing methods using densitometry to test selective antimicrobials (antimalarials, anti-TBs, and ARVs).
- RPM Plus and TFDA have developed a pilot plan to restructure the reporting system of the Minilab Zonal Center. RPM plus proposes to work with the TFDA to develop a standardized drug quality reporting system in one pilot Minilab center, to be selected by the partners. This reporting system will also focus on establishing clear monitoring and evaluation (M&E) guidelines to measure performance and accountability.
- Following up the AMR/malaria jointly held 2-day consultative meeting on pharmacovigilance (PV) in July 06, RPM Plus has finished a draft implementation guide "Getting Pharmacovigilance Off the Ground." This document concentrates on practical operational and coordination issues necessary to set up a PV system.
- RPM Plus has also developed a workplan to improve the adverse drug reaction (ADR) reporting system in 2 pilot districts in Tanzania. This workplan

- Conduct a training for PRA inspectors in Zambia on 3 key inspection activities at POEs: document verification; physical inspection; and testing by Minilab.
- The partners will also jointly develop plan to strengthen the monitoring and reporting structures of the new sites (data/information management) to ensure proper follow up and measure performance of inspectors.
- RPM Plus, along with TFDA and CDC, will develop SOPs and training materials to train district health workers in 2 pilot districts in Tanzania on ADR reporting. The partners will also visit the pilot sites to meet with district health management team to discuss the implementation plan.
- RPM Plus will develop and finalize a workplan with the Churches Health Association of Zambia (CHAZ) to provide technical assistance on various aspects of drug management, including procurement, quality control, storage, and distribution.

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Help strengthen quality assurance of selected antimicrobials through a regional approach

has been approved by TFDA/MOH, with a working group in place to advance and monitor implementation activities.

- RPM Plus (AMR/malaria) and USP DQI co-organized a regional consultative workshop in Dar es Salaam in November to discuss the quality of antimalarials. The workshop brought together national malaria control programs and national drug regulatory authorities of 13 countries in the region to share experience and exchange ideas on quality assurance systems. The goal of the workshop was to establish a framework for regional collaboration in quality assurance and related issues.

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Disseminate customized information on antimicrobial resistance in HIV/AIDS, malaria, and TB and other priority diseases in**Activity Manager** Green, Terry **Activity #** 8 **Task:** A1WW05AMR **Sub-Task:** 60G2H8**Activity Description** In FY06 RPM Plus and APUA will provide further technical assistance to VOA reporters and also directly to in-country media professionals to develop stories in Africa and Asia about the dangers of AMR in order to effectively deal with AMR and improve antimicrobial delivery and its effectiveness in HIV, Malaria, TB and other prevalent infectious diseases. RPM Plus, in collaboration with VOA and APUA, will engage, inform and train health reporters on AMR issues in Africa and Asia and conduct a 3-day training program in East Africa. The partnership will ensure active and accurate AMR reporting by maintaining follow-up with training participants via email.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus assisted the VOA in developing and broadcasting of 3 AMR related interviews in conjunction with the AMR Call to Action Meetings in Ethiopia, November 2006. Informants were identified for the interviews and technical information as well as background AMR information was provided to the assigned reporter. Another series of AMR reports and broadcast (5-part series English to Africa Program) has been developed by the VOA. Dates for broadcast have not yet been confirmed. RPM Plus contributed by identifying contacts for interviews and providing background AMR information for the series. AMR journalist training programs for Indian and Africa continued through this quarter.	None	<ul style="list-style-type: none">- Provide technical support for the 5-part series and other AMR related broadcast.- Identify dates for Africa training course- Provide support for the VOA launch of the Health Information CD for Journalist, Africa edition.		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Provide technical assistance for country-level implementation of infection control tools**Activity Manager** Goredema, Wonder **Activity #** 9 **Task:** A1WW05AMR **Sub-Task:** 60E3H0

Activity Description Building on the communication and tool dissemination process started in South Africa and Swaziland under last year's workplan, RPM Plus will leverage technical assistance for initial tool utilization, training and follow up activities for rapid cycle quality improvement (RCQI) at selected hospitals in these two countries. The finalized CD materials will also be translated into Spanish and piloted in selected hospitals in Paraguay and Peru with leveraging of FY06 SO5/AMR fund and the remaining LAC funding from previous years for infection control. African and LAC experiences will form the basis for an updated version of the CD and a self-learning tool suitable for availability on the MSH/RPM Plus website. This task will be initiated in FY06 and completed in FY07.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	- The infection control self-assessment tool with 21 modules and the accompanying users' manual were edited and finalized in RPM Plus format. These tools were disseminated to partners in Swaziland in preparation for the planned infection control workshop there at the end of January 2007. The workshop was decided based on a written communication to RPM Plus from the Swaziland Ministry of Health and Social Welfare to assist in initiating infection control activities in the country. - Consultation with DOH also resulted in communication to RPM Plus to coordinate with DOH to implement the infection control tools in South Africa.	None	- Work on the technical and logistics details for the Swaziland infection control workshop from Jan 29 to 31, 2007. - Communicate with local partners to decide on a similar infection control workshop in South Africa. - Disseminate the finalized self-assessment tool and the users' manual to UTH collaborators in Lusaka, Zambia.		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Finalize the manual "How to Investigate Antimicrobial Drug Use in Hospitals"**Activity Manager** Green, Terry**Activity #** 10**Task:** A1WW06AMR**Sub-Task:** 60F1E0

Activity Description A team of investigators led by local experts (potentially including those who have attended past DTC courses) will carry out research on antimicrobial use in hospital settings in at least two countries using the manual "How to Investigate Antimicrobial Use in Hospitals: Selected Indicators," developed by RPM Plus. From the findings, hospitals can investigate causes and design cost effective interventions using the tool to monitor progress and evaluate the interventions. Field test of the draft manual in more hospitals will also allow further revision and finalization of the tool. Once finalized the tool will be widely disseminated.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	- Internal discussions between AMR staff took place concerning the selection of potential investigators for the field test of the manual. - A concise 2-page description of the background and proposed scope of work for the activity was developed. It has been sent to two potential investigators (one in Africa and one in Asia) for their consideration in conducting the field test in their countries. It is anticipated that selection of investigators and contracting for the field test will be completed during January/February 2007.	None	- Identification and contracting of local investigators for field test of the draft manual in hospitals.		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance **Year** 06**Activity Title** Support SAIDI to advance AMR advocacy and containment**Activity Manager** Yeager, Beth **Activity #** 11 **Task:** A1WW05AMR **Sub-Task:** 60F1H6

Activity Description The AMR Portfolio will consolidate the RPM Plus contribution to SAIDI by leveraging further support for APUA to expand and build on FY05 activities. APUA Headquarter will continue to use existing APUA country chapters to work with SAIDI working groups to disseminate AMR information. All three SAIDI countries currently have APUA chapters whose representatives are part of the local SAIDI stakeholder group. Through the AMR Portfolio's support, APUA will continue to work and strategize with stakeholders and opinion leaders to strengthen local SAIDI groups. In collaboration with selected SAIDI international and national partners, APUA will provide technical assistance in surveillance, assessment and development of country specific AMR plans as well as provide training on Risk Perception and Communication in AMR alert.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Support SAIDI to advance AMR advocacy and containment**Project
Year 7 Q1**

In this quarter APUA has continued its efforts to strengthen the country chapters in the three SAIDI countries (Peru, Paraguay and Bolivia). APUA has also continued to work closely with the SAIDI international partners, and in particular Links Media, on the information and communication activities planned in Paraguay and Peru for the next quarter. Specifically in this quarter, APUA has accomplished the following:

- Peru: Dr. Anibal Sosa traveled to Lima in mid-October with representatives from Links Media and RPM Plus to advance the implementation plans for the activities listed in the SAIDI Peru logical framework. Dr. Sosa convened a meeting of APUA chapter members to discuss the chapter's progress and its participation in SAIDI activities. Members decided a change of leadership in the chapter was in order and elected Dr. Cesar Sangay, a well-known infectious disease specialist as president. Dr. Sosa and Dr. Sangay attended a workshop with the SAIDI national partners who are working on the communication activities in Callao.
- Paraguay: Dr. Sosa traveled to Asuncion in early December to meet with chapter members and discuss their participation in SAIDI.

None

- APUA Peru will develop a plan describing how they intend to support the activities that the communication group plans to implement.
- APUA Paraguay will also submit a plan of action describing their support of SAIDI communication activities in Peru.

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Antimicrobial Resistance**Year** 06**Activity Title** Develop a training session on AMR for USAID's global health E-learning Center**Activity Manager** Citysoft Admin**Activity #** 12**Task:** A1WW06AMR**Sub-Task:** 60F1MB

Activity Description RPM Plus will develop a module for the USAID Global Health E-Learning Center. For this, relevant background information will be collected and analyzed and priority AMR-related topics identified as key elements to be included in the sessions. Based on these materials the CPM Training Unit will develop the session. The session will then be reviewed internally for content and technical accuracy before finally submitting to USAID. Utilization of this internet-based resource is expected to improve awareness and understanding of AMR amongst USAID PHN officers in missions and staff at USAID/Washington, its Cooperating Agencies (CAs), and others. The activity will also contribute to the much needed global attention and advocacy for AMR

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">- Meeting held between RPM Plus technical staff and CPM training staff to plan the AMR module development process.- AMR portfolio sent key introductory AMR related reading documents to the training staff, who is identified to develop the draft e-learning module.	None	<ul style="list-style-type: none">- CPM training staff will develop an outline of the module and then develop the actual module after receiving AMR portfolio feedback on the outline.		

Last Updated: 12/22/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Malaria**Year** 05**Activity Title** Collect, compile, and provide support for the use of RDTs.**Activity Manager** Citysoft Admin**Activity #** 7**Task:** A1WW05MAL**Sub-Task:** 60DXH7**Activity Description** As ACT programs scale up, there is increasing demands for guidance on the procurement, distribution and use of RDTs. RPM Plus proposes to assist MMSS in compiling information on the procurement, distribution and use of RDTs, as well as to assist MMSS with the forecasts of demand for RDTs.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Concept paper and methodology finalized. Draft tools for data collection developed for internal review.		Finalize tools and plan for fieldwork.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Roll Back Malaria (RBM) **Year** 04**Activity Title** Support to USAID to conduct initial situation analysis for planning for the President's Malaria Initiative.**Activity Manager** Citysoft Admin **Activity #** 8 **Task:** A1WW04MAL **Sub-Task:** 60F4A8**Activity Description** RPM Plus will participate as a team member on initial country assessments to determine priority needs and most appropriate approaches for pushing the malaria agenda forward in selected countries.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	TA to develop PMI workplan in Rwanda	None	Finalize the work plan and present to the mission for approval. Start implementation of activities in collaboration with other PMI stakeholders		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Tuberculosis**Year** 05**Activity Title** Provide technical leadership to StopTB TB Working Groups and StopTB partners**Activity Manager** Citysoft Admin**Activity #** 3**Task:** A1WW05TBX**Sub-Task:** 60CXH3

Activity Description Continue to provide technical leadership to WHO, StopTB Partnership, and other global initiatives to ensure that pharmaceutical management considerations are addressed in their efforts. RPM Plus will contribute its expertise to technical meetings of the StopTB and StopTB working groups (DEWG, DOTS Plus, TB/HIV WG), and WHO/Euro Technical Advisory Group (TAG). RPM Plus will also co-facilitate with the GDF a workshop at the IUATLD World Congress for participants representing country TB programs and StopTB technical partners.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	In April 2006, the Stop TB Coordinating Board during a meeting in Abuja, Nigeria endorsed the terms of reference for the task force, which is made up of designates from six of the working groups, on retooling. During this quarter, the retooling paper, New Technologies for TB Control: A Guide for their Adoption, Introduction and Implementation, was completed and approved by the Stop Tb Task Force at the 11th Stop TB partnership coordinating meeting.		The re-tooling paper will be finalized, reviewed, and submitted to StopTB by end of 2006. It is expected, that there will be need in additional technical assistance from RPM Plus to further elaborate on aspects of management of specific new technologies.		

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Tuberculosis**Year** 05**Activity Title** Provide assistance to GLC in expediting response to DOTS Plus projects**Activity Manager** Zagorskiy, Andrey**Activity #** 4**Task:** A1WW05TBX**Sub-Task:** 60F3H4**Activity Description** Develop the methodology for a global study on 2nd line drugs for the GLC and coordinate data collection and analysis. In addition, RPM Plus will revise the Managing Pharmaceuticals and Commodities: A Guide for National Tuberculosis Programs developed with FY04 funding, and prepare its second edition specifically tailored for use by DOTS Plus pilots.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

MSH RPM Plus and GLC are working on the final draft of a report of the Global Market Survey of 2nd line TB Medicines.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Tuberculosis**Year** 05**Activity Title** Increase human capacity of StopTB partners in pharmaceutical management for TB (PMTB)**Activity Manager** Zagorskiy, Andrey**Activity #** 7**Task:** A1WW05TBX**Sub-Task:** 60CXH7

Activity Description continue its efforts in developing human capacity in pharmaceutical management through the following activities:

- Conduct a regional Workshop on Pharmaceutical Management for Treatment of MDR TB, and provide follow-up technical assistance to the course participants; this workshop will be conducted in collaboration with the GLC and StopTB DOTS Plus Working Group (the region will be identified by the GLC and StopTB DOTS Plus Working Group);
- Conduct training of new GDF consultants and WHO regional staff; at the request of the GDF this workshop will be conducted in French for the francophone countries of Africa; funds will be leveraged with the GDF, WHO/AFRO, and USAID/REDSO.
- Facilitate training sessions at four WHO Courses for TB Consultants in Sondalo, Italy; three of these courses now target both TB and HIV;
- Conduct sessions on pharmaceutical management at the WHO/TBCTA Course for NTP managers in Warsaw, Poland.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

A nine day regional training on Tuberculosis Control Program Management for senior staff working in TB control in Central and Eastern Europe and newly independent states was held from November 13-21, 2006 at the National Tuberculosis and Lung Diseases Research Institute in Warsaw, Poland. The RPM Plus TB program manager facilitated the Management of TB Drugs and Supplies course in which 26 participants attended. The training aims at improving management skills in program planning, training, logistics, laboratory support, recording and reporting and provides trainees with ample opportunities to reflect and plan for the challenges they are facing.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tuberculosis**Year** 05**Activity Title** Develop a guidance document on effective commodity management to complement WHO TB/HIV guidelines**Activity Manager** Owunna, Chinwe**Activity #** 8**Task:** A1WW05TBX**Sub-Task:** 60CXE8

Activity Description In collaboration with StopTB TB/HIV working group and UNAIDS, RPM Plus will finalize the two-phased activity. A guidance document based on the study findings will be developed. It will highlight different pharmaceutical management considerations of TB/HIV programs to address policy and organizational development, pharmaceutical management of collaborative interventions requiring pharmaceuticals, information management and monitoring. The document will provide guidance for TB and HIV program collaboration in commodity management; it will complement the WHO TB/HIV interim policy and guidance to decrease the co-infection rate.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus has completed phase two study in Ethiopia and Malawi, while the review and analysis of study reports in the two countries are ongoing. Final report write up for Ethiopia has begun. Draft summary case study reports for Uganda, Tanzania and Kenya have been completed.		RPM Plus has commenced the process of information verification with stakeholders in these 3 countries after which case studies can be finalized.		

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tuberculosis**Year** 05**Activity Title** Disseminate RPM Plus Pharmaceutical Management for TB tools and maintain website**Activity Manager** Zagorskiy, Andrey**Activity #** 9**Task:** A1WW05TBX**Sub-Task:** 60GXD9**Activity Description** RPM Plus will continue to maintain the TB drug management website www.msh.org/rpmpplus/tb, prepare and produce TB drug management tools and materials on CD-ROM; translate into French, print and disseminate "Managing Pharmaceuticals and Commodities: A Guide for National Tuberculosis Programs" into French for use in francophone Africa. It is expected that organizations working in TB control will have access to a wide range of materials related to pharmaceutical management for TB.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

The RPM Plus TB website is updated on a regular basis, while TB tools such as the Pharmaceutical Management for TB Assessment Manual and the Managing Pharmaceutical and Commodities for Tuberculosis Guide continue to be in demand and were distributed during the 37th IUATLD Congress held in Paris, France, October 31-November 5, 2006. Furthermore, two-page flyers on various TB activities and tools have been finalized.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tuberculosis**Year** 05**Activity Title** Formulate and disseminate global policy recommendations for use of Incentives and Enablers in TB control**Activity Manager** Mookherji, Sangeeta**Activity #** 10**Task:** A1WW05TBX**Sub-Task:** 60E4HO

Activity Description RPM Plus plans to disseminate the findings from the 4-year work program. To this end, we will conduct an open symposium and a closed workshop at the annual IUATLD conference in Paris. Findings from the previous 4 years' evidence-building activities will be presented. A concluding report, focusing on the technical findings, will be written and presented in a format that backs up policy decisions. The target audience for the report will be country NTP managers and TB control policy decision-makers at country and global levels, as well as donors and technical partnerships that fund and back-stop TB control programs. In addition, a series of advocacy tools, (print, electronic, and web-based), targeted at country missions, NTP programs, technical partners and donors, will be developed that deliver the key messages from the concluding report, outline possible approaches to TB I&E, and describe how tools developed by RPM Plus/MSH can be used to support these approaches. Finally, an article on TB I&E evidence and policy recommendations will be submitted for peer-review publication

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

RPM Plus completed the final draft of the RPM Plus report, "Evaluating Tuberculosis Incentives and Enablers in the Context of Scale-up: Evidence and Experiences". RPM Plus also revised the operations research and evaluation (OR&E) guide to better support NTPs in evidence-based decision-making regarding I&E. A 2-page briefing document summarizing this 4-year operations research activity of RPM Plus was developed.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tuberculosis**Year** 06**Activity Title** Provide technical leadership to the GDF in expediting response to DOTS strengthening and addressing MDR/XDR TB**Activity Manager** Citysoft Admin**Activity #** 2**Task:** A1WW06TBX**Sub-Task:** 60F3H2

Activity Description

- Continue to provide ongoing technical leadership and assistance to the GDF through RPM Plus staff permanently based in Geneva. (ongoing)
- Provide technical assistance and leadership during the GDF survey and monitoring missions and conduct audits of the GDF country monitoring reports (ongoing)
- Assist the GDF in the development of tools and survey mechanisms to ensure that new GDF products - laboratory commodities and pediatric TB medicines - are used in accordance with the GDF terms and conditions.
- Provide short-term TA to recipient countries where urgent problems have been identified and where donor support for TA is not available (new)

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

The RPM Plus TB program manager provided technical leadership for monitoring forms and checklists from various countries regarding pediatric formulations during the Technical Review Committee meeting held at the Global Drug Facility in Geneva, November 13-16, 2006.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tuberculosis**Year** 06**Activity Title** Provide technical leadership to WHO, StopTB Working Groups and partners, and other global initiatives to ensure that**Activity Manager** Citysoft Admin**Activity #** 3**Task:** A1WW06TBX**Sub-Task:** 60CXH3**Activity Description** RPM will conduct the following activities:

- a. Participate in technical meetings of the WHO and StopTB Working Groups meeting (DOTS Expansion WG, DOTS Plus, TB/HIV WG) (ongoing)
- b. Conduct a drug management workshop at IUATLD Congress Building Capacity in Pharmaceutical Management for TB, MDR-TB and TB/HIV. The workshop will be conducted in collaboration with the GDF/GLC (ongoing)
- c. Finalize paper on New Technologies for TB Control: A Guide for their Adoption, Introduction, and Implementation

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

MSH RPM Plus in collaboration with the GDF held a one day workshop titled Building capacity in pharmaceutical management for TB, MDR-TB and TB/HIV at the 37th International Union Against TB and Lung Disease in Paris, France on November 1, 2006. A total of 71 participants from various parts of the world such as Afghanistan, India, Philippines, Romania, Japan, Kenya, Uzbekistan, Kazakhstan, Turkey and South Africa attended the workshop.

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Common Agenda**Year** 05**Activity Title** Pharmaceutical Management Curriculum for U.S. based Graduate Level Programs**Activity Manager** Johnson, Keith**Activity #** 4**Task:** A1WW05CAX**Sub-Task:** 60XXF4**Activity Description** Based on an agreement with Johns Hopkins University School of Public Health and the Iowa School of Pharmacy, RPM Plus is assisting to develop a curriculum for pharmaceutical management within these institutions with a developing country focus.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	JHU: Developed proposed work plan for creation of a pharmaceutical management course for the Johns Hopkins University (JHU) School of Public Health. Finalized proposed scope of work. Received approval from Johns Hopkins University to add course to public health offerings. UI: Continued dialogue with University of Iowa (UI) College of Pharmacy on potential collaboration.	None	JHU: Develop budget and draft, finalize, and sign contract. UI: Draft proposed work plan and define scope of work with University of Iowa.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Africa Bureau/Child Survival **Year** 03**Activity Title** Technical Activity Coordination**Activity Manager** Briggs, Jane**Activity #** 1 **Task:** A1AB03CHS **Sub-Task:** 97XXY1**Activity Description** n/a

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, RPM Plus collaborated with BASICS and the national malaria program to conduct an assessment of the home-based management of malaria (HMM) program in Rwanda. RPM Plus was responsible for the pharmaceutical management and private sector components. All HMM Rwanda activities are funded by SO3 funds and are reported under A1WW05CHS 60A2H3.		RPM Plus will continue to follow up with PVO partners in Rwanda to provide technical support in their baseline assessments as well as in the technical implementation of the activities under the Expanded Impact Child Survival project which has a large community component.		

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Africa Bureau/Child Survival **Year** 04**Activity Title** Technical activity coordination and monitoring**Activity Manager** Briggs, Jane**Activity #** 1**Task:** A1AB04CHS**Sub-Task:** 97XXY1**Activity Description** n/a

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Monthly and quarterly reporting continue.				

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Africa Bureau/Child Survival **Year** 04**Activity Title** Continued collaboration with AFRO**Activity Manager** Briggs, Jane **Activity #** 3 **Task:** A1AB04CHS **Sub-Task:** 60F6H3**Activity Description** Promote and plan pharmaceutical management by regional AFRO and the country offices. RPM Plus will provide specific technical assistance to the AFRO team to integrate drug management into the child survival programs in the region.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Africa Bureau/Child Survival**Year** 04**Activity Title** Continued collaboration with AFRO**Project
Year 7 Q1**

Initiatives to integrate the pharmaceutical management component into the Integrated Management for Childhood Illnesses (IMCI) facility survey continued. A revised version was developed by a consultant of the standard entry and analysis sheets for in country use to input and analyze the data for the pharmaceutical management component of the IMCI facility survey. In Kenya, a consultant was hired to oversee the pharmaceutical management component of the IMCI facility survey. The consultant participated in the training and supervision of data collectors throughout survey implementation. The survey was completed and data was analyzed using the draft of the analysis sheets. A report was drafted and reviewed for integration into the final IMCI facility report.

In Senegal, RPM Plus participated with partners including the Ministry of Health and the World Health Organization to disseminate IMCI facility survey results (which included a pharmaceutical management component) at the regional and district level. At the national level, the survey results were presented at a workshop for the Partnership for Maternal, Newborn and Child Health (PMNCH) where feedback was given on the draft final report. The feedback will be incorporated into the final report before publication.

In addition to specific country activities, an abstract was written based on the DMCI experience and submitted for the Global Health Council Annual Conference. Further dissemination

The final IMCI facility survey reports will be completed in Senegal and Kenya, including the pharmaceutical management components. The standard data entry and analysis sheets for the pharmaceutical management component of the IMCI facility survey will be finalized in English, French and Spanish for in country use. Development will begin, in collaboration with AFRO, on a training package for drug management for child health for WHO regional and national staff and national child health managers, and participation in the revision of IMCI training to incorporate a drug management section. To promote dissemination of the country specific results and experience using the DMCI and C-DMCI tools, work will begin on drafting an article that reviews the experiences of implementing DMCI in several African countries.

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Africa Bureau/Child Survival **Year** 04**Activity Title** Continued collaboration with AFROactivities for child survival are reported in
A1WW03CHS 60G2D5.**Last Updated:** 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Latin America Caribbean SAIDI **Year** 05**Activity Title** Assist in the development and implementation of AMR containment strategies in collaboration with national SAIDI parnters.**Activity Manager** Yeager, Beth **Activity #** 2 **Task:** A1LN05AMR **Sub-Task:** 60AXH2**Activity Description** The specific actions to be taken under this activity will be decided on by national nd international SAIDI partners.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Latin America Caribbean SAIDI **Year** 05**Activity Title** Assist in the development and implementation of AMR containment strategies in collaboration with national SAIDI parnters.**Project
Year 7 Q1**

In October, SAIDI international partners RPM Plus, APUA and Links Media traveled to Peru to work on the implementation plans for the activities included in the SAIDI Peru logical framework. RPM Plus met with the national partners responsible for each activity and discussed ideas for implementation. Rough drafts were developed for most of the activities related to decreasing the use of antibiotics for respiratory infections in children under 5, including the development and implementation of standard treatment guidelines in Callao, dissemination of norms addressing the prescription and dispensing of antibiotics, the creation of a local drug information center in Callao and hosptial infection control measures. RPM Plus also continued to work with national partners to develop a plan to improve storage practices in Callao. A communications group was formed and a planning workshop was held to develop a communications plan for Callao.

In Paraguay, RPM Plus held a pharmaceutical management workshop for personnel in charge of regional drug warehouses. From participants contributions during the 3-day workshop, several key problem areas were identified. A follow up meeting with regional directors and administrators is planned to bring these problems to their attention and develop potential solutions.

There were no concrete constraints to progress in Peru and Paraguay but the process of working with national partners to develop implementation plans for discrete activities has been slow.

In Bolivia, there has been no activity this quarter.

In Peru, implementation plans for activities will continue to be developed. For next quarter, a consultant will be hired to carry out activities related to warehouses in Callao, including the development of technical guidelines and SOPs. Infrastructure in the DIC in Callao will be improved. The STGs for respiratory illness will be finalized and distributed in Callao. And other implementation plans will be finalized.

In Paraguay, implementation plans for the activities listed on the SAIDI Paraguay logical framework will be developed.

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Latin America Caribbean SAIDI **Year** 05**Activity Title** Dissemination of assessment results in all three initiative countries**Activity Manager** Yeager, Beth**Activity #** 3**Task:** A1LN05AMR**Sub-Task:** 60F1D3**Activity Description** RPM Plus will work with the national partners involved in the health facility assessments in all three countries to identify appropriate ways to make the results available. This may include the preparation of presentations, articles for publication in local journals or other types of printed material. This activity is planned for quarters 1 and 2.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Project
Year 7 Q1

Nothing to report for this quarter.

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Latin America Caribbean SAIDI **Year** 05**Activity Title** Participation in meetings with SAIDI national and international partners**Activity Manager** Yeager, Beth **Activity #** 4 **Task:** A1LN05AMR **Sub-Task:** 60F1N4**Activity Description** RPM Plus will participate with SAIDI national and international partners in meetings at three levels. First of all, following the assessment phase and the completion of a country profile, RPM Plus will join other SAIDI partners in a workshop in each of the three countries to share assessment results and develop strategies for the containment of AMR at the local level.

RPM Plus will also participate in "regional" technical meetings in which international partners meet with representatives of the SAIDI national groups to share information on the progress of SAIDI activities in each country.

Finally, RPM Plus will participate in meetings with other international partners to coordinate overall SAIDI activities.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	SAIDI international partners met in early October to discuss workplans for the year. Partners' workplans reflected activities present in the logical frameworks for SAIDI activities in Peru and Paraguay. Partners decided that in Bolivia, partners with already established working relationships would continue their activities and look for opportunities to include other partners. RPM Plus met with national partners in Peru in late October and in Paraguay in mid-November to discuss progress on logical framework activities.	None.	Next quarter, RPM Plus will travel to all three initiative countries to monitor progress of activities.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Latin America Caribbean IDI for TB **Year** 04**Activity Title** Technical assistance to follow up on specific country requirements**Activity Manager** Barillas, Edgar**Activity #** 3**Task:** A1LN04TBX**Sub-Task:** 60F2H3**Activity Description** This work plan includes resources to cover technical assistance missions to two countries in the form of country visits for a period of 10 days each on average. If an in-depth assessment or further technical assistance is needed, RPM Plus will explore with the USAID local mission, or other partners, the availability of financial resources to support the more intense activities in the country.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No activities planned for these quarter	No constraints	Remaining resources (US\$ 7,000.00) will likely support the introduction of individualized TB Treatment Kits in Paraguay or Bolivia. RPM Plus will explore the need of TA on January/07		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Malaria (MAC) Core**Year** 03**Activity Title** Global fund case study**Activity Manager** Shretta, Rima**Activity #** 20**Task:** A1WW03MAC**Sub-Task:** 60F4GJ

Activity Description Three countries, Ghana, Nigeria and Guinea Bissau will be used as case studies to document the process of implementation of TGF malaria grant. Each case study will focus on tracing key events of the implementation process from the development of Procurement Supply and Management (PSM) plans to the receipt of funds to mobilization of key stakeholders for the procurement process and ultimately distribution to health facilities. The study will be descriptive and document the process of implementation of ACTs, challenges faced and the actions taken to alleviate these challenges.

Specifically the Scope of Work addresses the following elements:

1. Develop and elaborate a framework with specific research questions for the study
2. Develop the methodology and tools to assist in data collection in the three countries
3. Conduct a desk-based document review to document the processes at the global level regarding the implementation of ACTs
4. Conduct interviews with key stakeholders in-country to identify the various challenges and bottlenecks that they have been faced with regarding the procurement and distribution processes for ACTs as part of the malaria grant.
5. Identify the mechanisms and the processes undertaken to address any challenges/bottlenecks.
6. Document key lessons learned that can be shared with other countries

The focus of this work will be limited to ACTs which are the first line treatment for malaria case management in all three countries. This study will be a collaborative effort between RPM Plus/MSH, TGF and the RBM Partnership.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Malaria (MAC) Core**Year** 03**Activity Title** Global fund case study**Project
Year 7 Q1**

a data collection tool/checklist of questions was finalized. A contact list of persons to be interviewed in Ghana, Nigeria and Guinea Bissau was compiled. Introductory letters were done and sent to each contact to be interviewed together with the description and rationale for the study. Field trips were conducted to Nigeria and Guinea Bissau in October and to Ghana in November, 2006. A draft report has been completed for Nigeria and it is expected that a complete draft report on the three case studies will be available to send to the Global Fund during the first week of January. A trip report for the Nigeria trip has been completed.

Ghana had a "no travel" period from September 15-November 15, therefore this trip had to be postponed until after November 15, causing delays in the final report.

Complete report, disseminate internally for review, send to the Global Fund in early January. Complete final report by end of January.

Last Updated: 12/14/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-REDSO **Year** 05**Activity Title** Technical assistance to regional malaria programs for ACT implementation**Activity Manager** Citysoft Admin **Activity #** 2 **Task:** A1RD05MAC **Sub-Task:** 60F4H2**Activity Description** Within this activity, RPM Plus will provide TA to training of pharmaceutical staff in Standard Operating Procedures at all levels of the distribution system.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus participated and supported ACT Management Working Group meetings in Tanzania. The working group is responsible for making key pharmaceutical management decisions and actions related to drug regulation, quality assurance and quantification.	None			

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: USAID E.A /RLI**Year** 06**Activity Title** Provide technical assistance to the Regional Pharmaceutical Forum (RPF) for the dissemination and country adaptation of**Activity Manager** Thuo, Michael**Activity #** 2**Task:** A1RD06XX**Sub-Task:** 60AXH2

Activity Description In FY 06, RPM Plus, will provide technical assistance to the RPF/ECSA HC and other regional collaborating partners, such as East African Community, to undertake dissemination and advocacy activities at regional level. The TA may include development of materials for advocacy and dissemination at regional health fora including the ECSA Health Ministers Meeting. At country level, dissemination activities will target the Division of Pharmacy in health ministries and disease specific programs e.g. National AIDS Control Programs, Divisions of Malaria and TB control. Specifically, a generic strategic plan for the implementation of the Medicines Policy by countries will be drafted and technical support provided to 2-3 member states that need to review national medicines policies. Also, technical assistance will be given to countries to institutionalize the periodic application of the Tool for regular performance assessment of the pharmaceutical management systems.

**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
<ul style="list-style-type: none">• All three documents were revised and feedback from regional experts incorporated. The documents were then sent to Washington for technical editing and publication.• Plans to disseminate the documents at a Workshop for regional stakeholders are underway. The Workshop is tentatively set for the 3rd Quarter.• Drafting of a 'Generic Medicines Policy Implementation Plan' was started. A consultant was engaged and an outline of the Plan will be ready for critique by RPM Plus by end of December.• Draft 1 of the Report on the assessment of pharmaceutical management systems is well under way and should be complete by end of December.	<ul style="list-style-type: none">• None	<ul style="list-style-type: none">• Work closely with USAID/EA and ECSA HC, to organize the dissemination workshop for stakeholders.• Prepare presentations/poster of the RPF work for the Regional Health Ministers Conference, set for mid-March, 2007.• Complete the Generic Medicines Policy Implementation Plan in time for the Policy TWG to review it in the 2nd Quarter.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** USAID E.A /RLI**Year** 06**Activity Title** Advocate and provide technical support for inclusion of a Pharmaceutical Management Module into the Pre-service Curricula of**Activity Manager** Thuo, Michael**Activity #** 3**Task:** A1RD06XXX**Sub-Task:** 60GXH3**Activity Description** In FY 06 RPM Plus will provide similar TA and support to an additional 2-3 health institutions and universities in the region.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">Discussed and planned for Workshops on implementation of the Pre-service Curriculum with universities and diploma in pharmacy awarding institutions in two countries:<ul style="list-style-type: none">National University of Lesotho – LesothoMakerere University – Uganda.Both implementation workshops will be held in the 2nd Quarter.	<ul style="list-style-type: none">None	<ul style="list-style-type: none">Firm up Workshop dates and logistics for both institutions.Finalize discussions with the University of Malawi and set dates for an implementation Workshop.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** USAID E.A /RLI**Year** 06**Activity Title** Provide support to ANECCA's pediatric cohort study sites and selected PMTCT programs to improve commodity management.**Activity Manager** Thuo, Michael**Activity #** 4**Task:** A1RD06XXX**Sub-Task:** 60CXH4**Activity Description** In FY06 RPM Plus will support this international collaboration by providing technical assistance to strengthen commodity management at 2-4 selected project sites in the region. Site strengthening will involve the inclusion of commodity management and pharmacovigilance modules in the in-service training curriculum developed by ANECCA. In addition, installation of computers for dispensing and application of proven inventory control tools such as the electronic ART dispensing tool, will be supported.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">In the first Quarter, RPM Plus reviewed Module 10 of ANECCA's "Curriculum For Comprehensive Paediatric HIV/AIDS Care For Health Workers In Africa, then developed a Unit on Pharmacovigilance and included it in the Module. The Unit comprises a Lesson Plan Guide, Power Point presentation and Pre-and Post Test Questions.Corresponded with the ANECCA Secretariat to identify appropriate sites from among the Paediatric Cohort Study facilities for the installation of the Electronic Dispensing Tool or any other site strengthening TA, as needed.	<ul style="list-style-type: none">Delays occur in implementing proposed activities because of the complexity of the ANECCA/Pediatric Cohort Study establishment and the need to respect and obtain concurrence with memoranda of understanding signed by the various partners.	<ul style="list-style-type: none">Plan for an in-service regional training on commodity management for ART, particularly, for the Paediatric Cohort Study sites.Identify high volume Paediatric and PMTCT sites in the region which could benefit from the electronic dispensing Tool.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: USAID E.A /RLI **Year** 06**Activity Title** Provide support to "Learning Sites" to disseminate better practices instituted for improving HIV/AIDS Commodity Management**Activity Manager** Thuo, Michael **Activity #** 5 **Task:** A1RD06XXX **Sub-Task:** 60F2H5**Activity Description** In FY 06, RPM Plus will assist the learning sites to disseminate better practices learned and instituted over the previous two years to other ECSA countries. The aim of this dissemination is to give opportunity to 3-4 additional sites to learn quickly and practically how to strengthen commodity management in resource constrained settings. Examples of these better practices with the relevant proven tools include; SOPs for the Pharmacy, monitoring and evaluation using a simple access based electronic dispensing tool, strengthening of pharmacy and therapeutics committees and adapting patient medicines information leaflets for country use.

Further, dissemination and support for adaptation of the 'Model Formulary for HIV/AIDS, TB and Malaria for ECSA Countries' will be undertaken. The methodology to disseminate these better practices may include training of staff from targeted sites using case studies from the three previously strengthened sites.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<ul style="list-style-type: none">Implementation of this Activity is scheduled for Quarters 2 and 3.	<ul style="list-style-type: none">None	<ul style="list-style-type: none">Develop a Template for the case studies which will be written on the three Learning Sites.Discuss and plan with USAID/EA the training on site strengthening for Paediatric ART, scheduled to be held in Burundi.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Albania **Year** 01**Activity Title** Home office project management**Activity Manager** Staley Jr., Robert **Activity #** 1 **Task:** A1AL01XXX **Sub-Task:** 97XXY1**Activity Description** The Albania Mission requested retargeting of the project. Technical Assistance (TA) in Pooled Procurement for the Albania hospitals and TA for the hospital drug reimbursement system to support procurement were not to be further developed. RPM Plus was directed to work on Standard Treatment Guidelines (STGs) collaboratively with the PHR Plus project working on developing Clinical Practice Guidelines (CPGs) and agree on work that did not duplicate the PHR Plus work.

Active discussions between PHR Plus and RPM Plus developed minor semantic differences between STGs and CPGs.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	none	Efforts to improve drug prescribing was indicated to be of biggest interest among stakeholders, but a formal invitation from the Ministry of Health is required to start working in this area.			

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Angola (PMI) **Year** 06**Activity Title** Technical Activity Coordination and Monitoring**Activity Manager** Diara, Malick **Activity #** 1 **Task:** A1AO06PMI **Sub-Task:** 97XXY1**Activity Description** This activity includes technical activity coordination, work plan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators. RPM Plus will support PMI activities in Angola through short term technical assistance provided by the RPM Plus staff based in the region as well as in RPM Plus headquarters from Arlington, Virginia, USA.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus traveled to Angola and held a series of meetings with key partners, including the NMCP, EDP, GFATM, WHO and EU to understand the current situation with regards to; revising the EDP management system to incorporate Coartem into that system, status of Coartem distribution for GFATM-financed program and status of operational planning for PMI. Visited Huambo Province to assess the status of Coartem distribution	None	RPM Plus will up date the draft of the National ACT implementation plan with a focus on Huambo province and the integration of the agreed roles and responsibilities of the different partners, revised health facility selection criteria, information on case load by age group and procurement for Angola. In coordination with USAID and the other PMI partners, RPM Plus will develop a one year action plan for its support for PMI implementation year 2		

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Angola (PMI)**Year** 06**Activity Title** Develop a national ACT distribution plan integrating the contribution of ACTs provided through PMI**Activity Manager** Citysoft Admin**Activity #** 2**Task:** A1AO06PMI**Sub-Task:** 60XXX

Activity Description RPM Plus will work in close collaboration with the NMCP, the National Essential Drugs Program (EDP), and other relevant counterparts and partners to develop a plan that will consider the quantification, procurement, storage and transportation from the central level to the facilities, beginning with priority provinces and municipalities. The national plan will evolve from and build upon provincial plans. Sub-activities include:

- Revision of the ACT quantification for the initial three month distribution to health facility based by incorporating more recent data on malaria cases by age group and health facility, beginning with selected municipalities and facilities in Huambo Province.
- Work with EDP to determine appropriate delivery routes and schedules, and based on this estimate determine the transportation and storage costs for the purposes of tendering a bid for a contract for these services.
- Develop a tracking and monitoring system that supports PMI reporting requirements.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Prepared a draft set of procedures for managing Coartem at health facility and provincial level, these were the basis for discussing with partners and preparing a final draft system for testing in Huambo during the first phase of PMI implementation	None	RPM Plus will finalize the Coartem management materials and their translation in Portuguese and will make them available for MENTOR. At the same time, develop the training support for Coartem management using the draft materials already prepared by EU. Work with MENTOR to plan and support the initial training of the health agents on Coartem management procedures in Huambo.		

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Angola (PMI)**Year** 06**Activity Title** Strengthen the EDP kit system to allow for the effective integration of ACTs**Activity Manager** Citysoft Admin**Activity #** 3**Task:** A1AO06PMI**Sub-Task:** 60XXX**Activity Description** RPM Plus will support the development and implementation of the EDP kit system, ensuring that it can support the appropriate management and use of ACTs. Sub-activities include:

- Adapt the EDP SOPs for the inclusion of Artemether-Lumefantrine and other malaria supplies and the phase out of chloroquine.
- Revise existing pharmaceutical management training materials to ensure that, in particular issues related to ACTs are addressed, such as the relatively short shelf life as compared to most other essential medicines.
- Support the planning and organization of training activities in pharmaceutical management and rational drug use as requested. This may involve a cascading design that begins with a training of trainers activity followed by provincial level trainings. RPM Plus support for implementation will depend on available funding.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Reviewed current storage capacities at Angomedica and the EDP and recommended on practical steps to be taken to ensure adequate control of PMI supplies at central level. Worked with EDP, USAID, MENTOR, World Vision, and NMCP to finalize the EDP forms and procedures for developing a Coartem management system for ACT implementation plan.	None	Support MENTOR and provincial partners in preparing the Huambo distribution plan Finalize the draft national ACT implementation plan. Organize an on site training of the EDP and Angomedica staff on inventory management and utilization of the Coartem requisition forms and procedures		

Last Updated: 12/21/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Brazil**Year** 06**Activity Title** Monitor national study to re-evaluate appropriate drug regimen for TB failures**Activity Manager** Keravec, Joel**Activity #** 2**Task:** A1BR06XXX**Sub-Task:** 60E3H2

Activity Description RPM Plus provided technical assistance and management support to Helio Fraga TB Center and an expert working group to develop a study protocol and methodology for testing resistance in the population to currently used TB medicines, and for testing appropriate regimens to remove the drug ethionamide which is not recommended by WHO due to potential serious adverse reactions. The study protocol was approved by local TB experts, the national TB program (NTP) and the national ethical committee. RPM Plus plans to continue this support in FY06 by monitoring the initiation and carrying out of the study. RPM Plus will hire a consultant with study monitoring experience to train cohort center personnel, set up data collection sites, and coordinate the analysis of study data. Because of the slowness in adding patients to the cohort, the study will likely require three years to complete.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Brazil**Year** 06**Activity Title** Monitor national study to re-evaluate appropriate drug regimen for TB failures**Project
Year 7 Q1**

- After the withdrawal of clofazimin in the MDR TB standardized regimen, and the need to re-formulate a new regimen (currently clofazimin has been substituted by pyrazinamid for sensitive patients) new discussions are on-going on potential re-formulation of Brazil TB re-treatment regimens; RPM Plus and TB National Reference Center + NTP had the opportunity to discuss the current treatment schemes used in Brazil with Union TB specialists like Dr Caminero suggesting some major changes in the current schemes, in particular using only one re-treatment scheme, instead of RI and RIII. A committee of Brazilian and international experts has been formed and is studying these hypothesis which might orient some changes in the study protocol recently approved by Anvisa. RPM Plus is waiting for the conclusions of the experts group to define if the schemes will be changed, and if the protocol will have to be adapted. Several protocols for treatment have been proposed and worked on, and there is no consensus to be brought to the technical committee of the MoH. The current consensus achieved till now is the simplification of the treatment regimen by having only one treatment regimen in case of failure to the first scheme 1. When the composition of this re-treatment will be defined, the study can start and test this new regimen for re-treatment against the previous R3.
- RPM Plus identified a consultant with study monitoring experience to train cohort center personnel, set up data collection sites, and coordinate the analysis of study data
- Elections results may lead to some changes in the TB expert groups. Since there is still no definition at MoH for new government technical discussions for important decisions of this nature like regimen changes are unlikely to be taken before early March 2007.
- Unsure of funding to RPM Plus for partial support of the 3 year study
- Because of the slowness in adding patients to the cohort, the study will likely require three years to complete from the date of initiation.
- Develop information system for tracking study
- Develop training materials for study investigators
- Identify investigators at each study site
- Conduct informational meeting with study investigators to prepare for launch of study
- Prepare monitoring and supervision system
- Analyze the patient treatment outcomes of regimens used in the studies
- Report findings and recommendations for regimen change

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Brazil**Year** 06**Activity Title** Monitor national study to re-evaluate appropriate drug regimen for TB failures**Last Updated:** 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Brazil**Year** 06**Activity Title** Support national study to re-formulate first line TB drugs to fixed-dose combination (FDC) products**Activity Manager** Keravec, Joel**Activity #** 3**Task:** A1BR06XXX**Sub-Task:** 60E3G3

Activity Description RPM Plus during the last two years has mobilized a stakeholders group representing all necessary MoH agencies for FDC introduction (manufacturers, FDA, NTP, Pharmacy Department). A working plan with shared responsibilities was developed and RPM Plus is providing technical and managerial assistance through local and international experts. The largest government manufacturing laboratory Farmanguinhos, acquired new equipment in its facility which is dedicated to TB drugs production (FDCs and pediatric sachets). The following products are either in stability testing phase or are ready for production by the national laboratories.

- Moved from 2 products in 1-product FDCs in tablet form (was capsules) for better stability of the products
- Developing formulations for three products in one and four products in one FDCs (3-FDC, 4-FDC) in tablet forms
- Developed pediatric formulations including sachets which are in advanced stability testing

Using the stakeholder's working group approach which included the highest level personnel possible from the MoH has led to better integration of Brazil manufacturing potential and procurement strategy and gave Brazil a chance to better understand strategies of the international partners such as WHO's Global TB Drug Facility and Green Light Committee. It is interesting to note that the national Malaria program has copied the RPM Plus approach, apparently with similar results. Another important outcome is the visibility Brazil has gained in the Latin America-Caribbean (LAC) region as a potential provider of TB medicines.

In FY06 RPM Plus plans to support a South-to-South approach for further developing and implementing FDCs in Brazil. Dr. Bernard Fourie developer of the FDC four products-in-one for the WHO and who is familiar with the Brazil system would provide technical expertise during the implementation. This technical assistance began at the Second National Conference for Tuberculosis held in São Paulo, Brazil 19-22 July 2006 when Dr. Fourie presented on the transition process of South Africa for switching to FDCs and also had several meetings with Brazilian producers, the quality assurance program and the national TB program. All are on-board for his expert assistance as Brazil moves to the 3-FDC product.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Brazil**Year** 06**Activity Title** Support national study to re-formulate first line TB drugs to fixed-dose combination (FDC) products**Project
Year 7 Q1**

- RPM Plus was asked by NTP-MOH/Ministry of Science and Technology to join and support the technical expert group in charge of developing a scope of South-to-South collaboration between Brazil, South Africa and India in TB area for pharmaceutical related issues like production of FDCs or MDRTB monitoring. The workshop was held In November 2006 in Cape Town with the following objectives: information exchange between the three countries on TB research; sharing of best practices; and developing joint activities in areas of substantive collaboration (including health systems and operational research, and better incentives for national biotech companies). The three main areas of discussion in the workshop were drug and vaccine development, development of new diagnostic methods, health systems research and operational research, including management of MDR-TB and HIV-associated TB. Useful contacts were taken with Indian and South African experts for further developing and implementing FDCs in Brazil
- ? RPM Plus had several meetings with Farmanguinhos to monitor results and progress for: finalizing final steps of rifampicin and isoniazid tablets (FDCs) production, developing other formulations of Rifampicin, Isoniazid and Pyrazinamid (FDCs) with new ordered raw materials, preparing the TB products calendar for TB area production during the transferring of manufacturing activities from Manguinhos site to the new plant of Jacarepagua expected to be completed first trimester 2007.

- Some delay will occur for 3 in 1 and 4 in 1 FDCs production plan since the results of the stability testing revealed non-conformity for some assays after the month 12, consequently new pilot batches will have to be produced
- Obtaining raw materials of rifampicin within short terms and within the standards of quality required is a challenge to shorten the lead time for introducing FDCs into the national treatment regimen this current year.

- Provide technical assistance in developing a study protocol for evaluating changes of current treatment regimens to FDCs
- Provide assistance for developing bioequivalence and bioavailability studies necessary to register the new formulations of 2 in 1 FDC (R+H , tablet) with ANVISA through the Center for Research of IPEC/Fiocruz
- Hire TB experts to provide technical assistance in conducting appropriate studies

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Brazil**Year** 06**Activity Title** Support national study to re-formulate first line TB drugs to fixed-dose combination (FDC) products**Last Updated:** 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Brazil**Year** 06**Activity Title** Coordinate decentralization of the quality control system for TB pharmaceutical management**Activity Manager** Keravec, Joel**Activity #** 4**Task:** A1BR06XXX**Sub-Task:** 60DXH4

Activity Description During the past two years RPM Plus used the stakeholder's working group approach and established a sustainable system at the MoH for testing 1st and 2nd line TB drugs, the first testing program in Brazil of its kind. The working group highly mobilized persons from cross cutting agencies and stakeholder organizations to assure procurement, distribution, quality control and rational use of TB drugs. This is the first time such a group of stakeholders has taken a holistic, comprehensive approach to improve the quality of drugs all the way from national selection of medicines to their final use by health workers and patients in treatment settings. One of RPM Plus' main partners, INCQS was instrumental in supporting this work and RPM Plus has been the main catalyst in making this activity successful.

Another important success factor has been the LabMOST a new tool for Quality Systems Implementation in Drugs Quality Testing Labs introduced by RPM Plus over the last two years. The LabMost is helping to move reference labs to ISO accreditation (norm ISO/IEC 17025) by providing a comprehensive set of management tools for strengthening lab capacity. The LabMost tool is currently being adapted for minimum quality systems implementation in labs performing in limited resource settings. As a result of the previous successes the national product quality working group decided that 11 additional laboratories located throughout the country will be involved in the ISO accreditation process which will in effect decentralize capacity of product testing closer to where the products are being manufactured.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Brazil**Year** 06**Activity Title** Coordinate decentralization of the quality control system for TB pharmaceutical management**Project
Year 7 Q1**

- Monitored on-going progress in the established workplans to meet quality standards of the 3 state laboratories Amazonas, Goiás, and Ceará using the MOST tool in partnership with INCQS
- Final edition of the LabMost using results and observations from its application in different labs in partnership with INCQS
- Poster presented at the 2006 IUATLD congress on LabMost using results and observations from its application in different labs in partnership with INCQS
- Assisted INCQS and Helio Fraga TB Reference Center in recruiting and hiring a consultant specialist in TB labs quality for implementing the quality system of the national TB reference lab. All quality procedures and manuals are currently under audit and revision
- Results of the elections for state governors may result in changes in state labs directions leading to the needs of renegotiate previous agreements signed for technical collaboration on using the Lab MOST for quality management strengthening and decentralization of the TB medicines quality control program
- Continue technical assistance to five strategic Public Health State laboratories to decentralize the analytical capacity of TB drug quality testing at regional level and to strengthen their quality systems (Amazonas, Goiás, Paraná, Ceará, Bahia)
 - Assure the continuity of the current quality assurance activities by continuing articulation with authorities of the MoH
 - Provide technical assistance when needed for complex methodology of quality testing of MDR-TB products like amikacin, ethambutol, terezidon or FDCs (eg. 3-FDC product containing Rifampicin, Isoniazid and Pyrazinamide)
 - Expand technical assistance to the State Lab Network and provide proficiency tests to confirm the capacity of TB drug testing promoting success of the decentralized network
 - RPM Plus will collaborate to organize technical visits from INCQS technicians to the TB drugs producers of the public lab network
 - Edit the final version of the LabMost

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Brazil**Year** 06**Activity Title** Expand DMIS surveillance system for managing MDR-TB patients**Activity Manager** Keravec, Joel**Activity #** 5**Task:** A1BR06XXX**Sub-Task:** 60G4H5

Activity Description During the past two years RPM Plus has worked with one of its main partners CRPHF to develop DMIS surveillance system for managing MDR-TB patients: Created a model for decentralization •Developed course methodology and educational materials for training of MDR-TB reference center personnel•Is web-based for data entry facilitating use by local and national level MoH personnel•Created a procedural guide for both: –use of the web-based system, and –training plan so that reference centers can train additional personnel•Has been institutionalized whereby the computer server and system are managed by CRPHF (MoH organization operating at the national level)•Implemented in 27 states•Is a capacity building program where 450 health professionals in 61 MDRTB reference centers have been trained and are currently using the system•Increased case detection rate of MDR-TB significantly increased 2nd year after the project started.Plans for FY06 are to expand the surveillance model to include all re-treatment cases under the DOTS program to optimize monitoring and prevent risks of MDRTB. An evaluation will be done to determine the correct usage of the system one year after implementation. Based on this evaluation the system will be modified if needed. RPM Plus and its partners also plan to expand the MDRTB model to underserved populations including community programs, indigenous areas and states/country prison system as much as possible. Considerable interest about the MDR-TB surveillance model has been expressed outside Brazil. Dr. Joel Keravec, RPM Plus/Brazil technical coordinator and Dr. Miguel A.Hijjar, Director of CRPHF traveled to Atlanta at the request of PAHO to participate in the GLC partners' summit in May 2006. Then in July 2006 Dr. Keravec and Dr. Margareth Dalcolmo CRPHF Director of out- patient treatment traveled to Mexico City at the request of PAHO and the TB UNION to demonstrate the MDR-TB surveillance model and to facilitate sessions on appropriate use of the web-based tool including steps in the implementation process. Brazil MOH and Ministry of Foreign Affairs have asked that RPM Plus become part of a forum to share this experience in a South-to-South technical cooperation project they are planning to implement among countries such as India, China, South Africa and Brazil. Also, two countries in the NIS region, Moldova and Romania have expressed interest in using the model in their countries using RPM Plus support as well.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Brazil**Year** 06**Activity Title** Expand DMIS surveillance system for managing MDR-TB patients**Project
Year 7 Q1**

- New epidemiological reports for cohort results consolidations + updated routine for medicines management have been inserted in the system
- First version of the "Guide for Epidemiological Surveillance and Information System for MDR-TB Control"—edited and distributed to TB professionals and MDRTB Reference Centers at the National Congress of Brazilian Society for Phtisiology and Pneumology in Fortaleza, November 2006 + poster presented with MDRTB surveillance system description and results.
- Revision and updating of data in the database for the DMIS system led in October 2006 to the following results: 2584 Notifications forms + 5574 Follow-up forms have been revised, corrected and entered in the new system, contributing to the quality and quantity of information of the MDRTB national database
- On-going revision of the user's manual + development of a help tool on-line
- State Reference Centers are accessing to the system for electronic case notification and follow-up information
- A policy for MDRTB information release at the National TB Reference Center Helio Fraga in coordination with the Epidemiological Surveillance Department of MoH is currently being defined for application at national level.
- 4 abstracts proposing a cross cutting look over the initiatives on MDRTB surveillance systems in Brazil, Moldova and Romania supported by RPM Plus were submitted to the Global Health Council 2007.
- Slowness in getting server setup at CRPHF, so RPM Plus is still assuming the hosting of the DMIS on the Web
- The learning process for using the new system by operators at Reference Centers is still slow and not satisfactory in the completion of data to be sent to the national level, leading to a need of re-check and confirmation of missing information at the time of validation process
- The majority of trimestral follow-up forms from 2000 till 2006 have not been elaborated by the TB specialists of the reference centers : RPM Plus contracted 2 more TB consultants for data revision and patients files analysis at the MDRTB ambulatory of Helio Fraga Center.
- Publish the final version of the DMIS user guide for the new DMIS
- Publish the user manual of the system
- Field test the updated DMIS computer application for accuracy and flow of data
- Continue to support the decentralization of the management of MDR-TB cases in Brazil
- Define model and methods for conducting an evaluation of the decentralized DMIS for strengthening diagnosis, treatment and management of MDR-TB cases in Brazil
- Define the model for designing new functionalities to adapt the current system to all re-treatment cases monitoring

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Brazil**Year** 06**Activity Title** Expand DMIS surveillance system for managing MDR-TB patients**Last Updated:** 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Dominican Republic**Year** 02**Activity Title** Support the analysis of the information produced by the DMIS**Activity Manager** Barillas, Edgar**Activity #** 6**Task:** A1DO02XXX**Sub-Task:** 60G4H6

Activity Description The PMIS is starting to produce data on availability and consumption of medicines in all levels of the logistical network. FY06 resources will support central level technicians on the analysis of this information and its use for annual quantification exercises and periodical ordering. Unused FY02 resources (USD, 20,000.00, originally assigned to software adjustment, as described above) will be reprogrammed to support this activity.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus Senior Program Associate, Edgar Barillas, visited Dominican Republic from Nov 7 to Nov 10, to support the analysis of information produced by the TB-DMIS. As a result some decisions were taken, regarding the estimation of needs and ordering to the GDF.	No constraints	Next visit to Dominican Republic is programmed for Feb 07.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Dominican Republic**Year** 04**Activity Title** Implementation of the Drug Management Information System to assess the availability of TB medicines**Activity Manager** Barillas, Edgar**Activity #** 3**Task:** A1DO04XXX**Sub-Task:** 60CXA3**Activity Description** RPM Plus will conduct two rapid assessments of the levels of TB pharmaceutical supplies during visits programmed for June and September 2005. The assessments will be concentrated in pilot areas V and VIII, but information collected (electronically and by fax) from other provincial warehouses will be analyzed as well. Due to recent changes in the NTP staff, the visit in June will also serve the purpose of reintroducing the work of RPM Plus and the progress in the implementation of the DMIS to the recently appointed NTP logistics manager.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus Senior Program Associate, Edgar Barillas, visited Dominican Republic from Nov 7 to Nov 10. One of the main activities during the visit was to assess the availability of TB medicines in the central medical store, and health facilities (through information provided by the DMIS). As a result decisions were taken regarding the procurement of loose drugs and FDC.	No constraints.	Provide assistance to estimate the needs for a third procurement to the GDF during the next visit programmed for FEB/07		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Dominican Republic**Year** 06**Activity Title** Participation in external and internal evaluations of the NTP**Activity Manager** Barillas, Edgar**Activity #** 4**Task:** A1DO06XXX**Sub-Task:** 60F3A4**Activity Description** In addition to the follow up activities, the USAID mission requested the participation of RPM Plus in national evaluations of the NTP, and as part of external evaluation teams. FY06 resources will finance the participation in one evaluation visit. Unused FY05 resources will also support this activity.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No activities planned for this quarter.	No constraints	RPM Plus will participate in the next internal evaluation of the National TB Program, tentatively scheduled for Feb 27 - March 2.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Ghana **Year** 04**Activity Title** Technical assistance to the National Malaria Control Program for implementation of the new antimalarial drug policy**Activity Manager** Tetteh, Gladys **Activity #** 1 **Task:** A1GH04MAC **Sub-Task:** 60A4H1**Activity Description** RPM Plus will assist Ghana with the development of a transition plan which incorporates a strategic plan and an implementation plan to facilitate implementation of the new policy. In addition, RPM Plus will participate in and contribute to meetings concerned with malaria treatment and prevention and policies. Technical inputs into finalization of the antimalarial drug policy, guidelines and training manuals will also be activities used to support the NMCP during the period prior to and during implementation of the new drug policy.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Activities have been discussed with the USAID Mission in Ghana and with the Malaria Control Program Manager in Ghana. However, activities have been put on hold until the USAID Mission approves them. RPM Plus CTO to discuss with the USAID Mission in Ghana.	USAID Mission in Ghana has not approved moving ahead with proposed activities.	Continue discussions.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Ghana **Year** 04**Activity Title** Assist the Ghana National Malaria Control Program in pre-packaging of AS/AQ**Activity Manager** Tetteh, Gladys **Activity #** 2 **Task:** A1GH04MAC **Sub-Task:** 60C4H2**Activity Description** To ensure that the pre-packaging of AS/AQ is in line with the global standards for pre-packaging of Artemisini-based Combination Therapies (ACTs); RPM Plus will work with the Ghana Health Service/NMCP, Food and Drugs Board, local manufacturers and other stakeholders. The in-country stakeholders have already been meeting to have discussions on the national standards for the ACT combination pre-packaging to be used in Ghana. RPM Plus inputs will include sharing experiences from the global level as well as from other countries.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Activities have been discussed with the USAID Mission in Ghana and with the Malaria Control Program Manager in Ghana. However, activities have been put on hold until the USAID Mission approves them. RPM Plus CTO to discuss with the USAID Mission in Ghana.	USAID Mission in Ghana has not approved moving ahead with proposed activities.	Continue discussions.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Ghana **Year** 04**Activity Title** Work with Ghana National Drug Program to re-rate AS/AQ**Activity Manager** Tetteh, Gladys **Activity #** 3 **Task:** A1GH04MAC **Sub-Task:** 60CXH3**Activity Description** In order that antimalarials be placed at the appropriate levels of care within the Ghana Health Service, RPM Plus will work with the Ghana National Drugs Program (GNDP) to revise the scheduling of antimalarial drugs for appropriate levels. This process will require agreement among in-country stakeholders of the levels of care to which particular antimalarials should be assigned as well as a subsequent addendum to the essential drugs list.

For example, the fifth (current) edition of the Ghana Essential Drugs List confines the circulation of quinine to Level C facilities (hospitals). In order to enable the use of quinine for treatment failure and for treatment of pregnant women, RPM Plus will work with the GNDP to re-rate quinine to Level B.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Activities have been discussed with the USAID Mission in Ghana and with the Malaria Control Program Manager in Ghana. However, activities have been put on hold until the USAID Mission approves them. RPM Plus CTO to discuss with the USAID Mission in Ghana.	USAID Mission in Ghana has not approved moving ahead with proposed activities.	Continue discussions.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Ghana **Year** 04**Activity Title** Work with the Ghana Drug Regulatory Authority to strengthen the drug regulatory procedures and practices**Activity Manager** Citysoft Admin **Activity #** 4 **Task:** A1GH04MAC **Sub-Task:** 60A5H4**Activity Description** RPM Plus will work with the Ghana Food and Drugs Board to ensure that implementation of the antimalarial drug policy is accompanied by the setting and enforcement of appropriate drug regulatory requirements and drug quality assurance.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Activities have been discussed with the USAID Mission in Ghana and with the Malaria Control Program Manager in Ghana. However, activities have been put on hold until the USAID Mission approves them. RPM Plus CTO to discuss with the USAID Mission in Ghana.	USAID Mission in Ghana has not approved moving ahead with proposed activities.	Continue discussions.		

Last Updated: 12/13/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Honduras**Year** 01**Activity Title** Conduct TB drug management training-of-trainers workshop and hands-on assistance for selected trainers.**Activity Manager** Paredes, Patricia**Activity #** 2**Task:** A1HN01XXX**Sub-Task:** 60F3E2**Activity Description** RPM Plus will conduct a TOT workshop for the TB regional managers and members of the national team.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No activities planned for this quarter.	Because of conflicting agendas, the NTP program suggested to postpone the activity for the end of 2006. Several attempts to contact the NTP manager to program this activity have failed. The USAID mission was informed.	RPM Plus will try to contact (again) the NTP on January 07.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Honduras**Year** 01**Activity Title** Technical assistance and follow-up visit.**Activity Manager** Paredes, Patricia**Activity #** 3**Task:** A1HN01XXX**Sub-Task:** 60F3H3

Activity Description Follow-up of country activities will be done in coordination with the national TB managers. RPM Plus will communicate through telephone and electronic mail, providing technical assistance to country managers during the stages of monitoring activities. A report will be prepared after this second workshop to assess the need for further technical assistance by RPM Plus and the areas where this assistance might have more impact.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No activities planned for this quarter	Because of conflicting agendas, the NTP program suggested to postpone the activity for the end of 2006. Several attempts to contact the NTP manager to program this activity have failed. The USAID mission was informed.	NTP manager will be contacted (again) on January 07		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Kenya COP**Year** 06**Activity Title** Plan, coordinate, and inform health commodity procurement and distribution by working collaboratively with MEDS and USG PEPFAR**Activity Manager** Thuo, Michael**Activity #** 2**Task:** A1KE06HIP**Sub-Task:** 60CXH2**Activity Description** Under COP 2006, RPM Plus will continue coordinating ART commodity supply and distribution efforts on behalf of the USG team. MSH/RPM Plus will continue playing its role as the source of data and information for ARV drug usage by the ART sites.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Kenya COP

Year 06

Activity Title Plan, coordinate, and inform health commodity procurement and distribution by working collaboratively with MEDS and USG PEPFAR

**Project
Year 7 Q1**

1. Procurement of ARVs
RPM Plus worked closely with the USG PEPFAR inter-agency team and MEDS to monitor the rate of delivery of the procured ARV drugs into MEDS so as to inform program growth. The ARVs procured under the Kenya PEPFAR program are used for supporting both the ART and the PMTCT programs.

2. Distribution of ARVs to sites
RPM Plus worked collaboratively with MEDS and the Inter-agency team in ensuring that the ARV drugs were distributed to Kenya PEPFAR program approved sites (both ART and PMTCT sites).

By the end of this quarter, the following 125 ART sites were receiving ARVs from MEDS for their ART program, with assistance of RPM Plus:

- 66 public sector facilities
- 34 faith based facilities
- 15 community based facilities
- 6 private sector facilities
- 4 NGO-based facilities

RPM Plus also supported the PMTCT program, by coordinating the ARV drug distribution to PMTCT sites. By the end of this reporting period, a total of 135 sites were receiving PMTCT ARV drugs through RPM Plus.

The ARV drugs for the ART and PMTCT programs were issued through 106 ordering points spread out in 7 provinces.

RPM Plus continued to coordinate the distribution of pediatric ARVs procured by Clinton Foundation. This was in an attempt to ensure that those drugs at risk of expiring are issued to sites, whereas with-holding the ones which

1. Procurement of ARVs

- Long lead times by suppliers in delivering some ARV drugs to MEDS. Examples where there were delays included Abacavir 300mg tablets, Abacavir solution.
- Lengthy and cumbersome procurement procedures especially for drugs for opportunistic infections. These have not yet been procured by the Kenya PEPFAR program. Whatever is being issued to sites had been procured through another donor.

2. Distribution of ARVs to health facilities

- Erratic stability in the availability of ARV drugs supplied under the GOK program meant that many public sector sites utilized drugs from the PEPFAR program. This meant that only a few sites could be started up as the existing sites had to be stabilized.

- Dual supply of ARV drugs to some public-sector sites posed a challenge to some sites as it was not clear on which patients to be put on ARVs supplied through MEDS and which ones to be put on the FDCs supplied through the public sector.

- Some sites were still not able to place their orders in a timely manner. This was due to various reasons e.g. excessive workload, responsible persons for placing orders being absent etc.

3. Data collection and collation

1. Work collaboratively with MEDS and the Inter-agency in the timely quantification and forecasting of ARVs and procurement from approved suppliers.

2. Work closely with NASCOP to coordinate and streamline the dual supply of ARVs to ART sites.

3. Assist MEDS in following up with suppliers in an attempt to shorten the lengthy lead times for specific drugs.

4. Continue providing technical assistance to sites to improve their management of data and subsequent reporting on ARV drug utilization. This includes the use of tried and tested manual tools developed by RPM Plus and others for commodity management. For those sites that are able to afford computers, they will be provided with the computer based ART Dispensing Tool developed by RPM Plus to assist in managing data for both the patients receiving drugs, and the stocks within the pharmacy.

5. Work closely with the PMTCT group in ensuring that the system for ordering ARVs by sites and reporting on utilization is strengthened.

Workplan: Kenya COP**Year** 06**Activity Title** Plan, coordinate, and inform health commodity procurement and distribution by working collaboratively with MEDS and USG PEPFAR

had a long expiring (in line with the FEFO principle).

Further, by virtue of RPM Plus coordination role in the ARV ordering process, it provided information crucial to inform the national ARV drug supply chain.

3. Monitoring utilization of ARVs by sites
RPM Plus worked with the Kenya PEPFAR Inter-agency team to continue monitoring the utilization of ARVs at ART points of service. By collecting and collating this information from the sites, it was possible to ensure that sufficient ARV drugs were maintained at the central stores (MEDS) all the time. Follow ups were made by RPM Plus to the sites to discuss the status of their ARVs and advise on issues related to ARV utilization, as well advise on scale up.

The feedback from sites was thus useful in informing the Interagency team, MEDS and NASCOP on effective and efficient planning for commodity acquisition and distribution to sites in a timely manner.

on ARV drug utilization

- Lack of tools to track commodity utilization and patient service statistics at the points of service.
- Some sites had a very high patient load and their use of manual data collection tools made the process slow and cumbersome.
- Some sites do not have skilled staff to manage their data in order to prepare accurate reports on drug utilization.
- Missing data from the sites at times in some of the reports
- Late reporting by sites.
- For the PMTCT program, the data collection was a big challenge as many sites did not have the primary data capture tools.

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MEDS to support the scale up of access to and rational use of ART in Kenya**Activity Manager** Thuo, Michael**Activity #** 3**Task:** A1KE06HIP**Sub-Task:** 60EXH3**Activity Description** Activities will include;

- Technical assistance to strengthen MEDS staff in quantification and inventory management techniques.
- Technical assistance to strengthen MEDS Management Information Systems (MIS) and client service,
- Improving the HR Capacity for commodity management through training and mentoring, and regional study tours
- Strengthening the Training, Supervision and M&E initiatives.
- Strengthening MEDS capability to support both the public and private ART sites through appropriate linkages and synergies
- Strengthen current MEDS ART commodity management training initiatives

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Kenya COP

Year 06

Activity Title Provide technical assistance to build the capacity of MEDS to support the scale up of access to and rational use of ART in Kenya

**Project
Year 7 Q1**

1. TA to strengthen MEDS staff in quantification and inventory management techniques.
During this period, RPM Plus had planned to support MEDS by training more staff during a national quantification training including the use of Quantimed. However, it was not possible to get away MEDS staff for a whole week's training. Another training to be held at a later date.

2. Technical Assistance to strengthen MEDS Management Information System and client service
RPM Plus has worked closely with MEDS to establish a robust demand driven system for ordering ARV drugs through MEDS. RPM Plus has also gone ahead to coordinate the ordering by sites, and facilitate collection and collation of information from sites so that the information captured by MEDS is already cleaned up and ready for inputting into the MEDS system. This support has allowed MEDS to be responsive to their clients, and to generate various types of commodity management reports.

3. Improving the HR Capacity for commodity management through training and mentoring, and regional study tours

- RPM Plus will continue to support MEDS in realizing this goal since it has already been involved in training staff from most of the ART sites being serviced through MEDS.
- RPM Plus conducted a national training on Quantification of HIV/AIDS commodities for national and program level staff. Participants were drawn from

- The rapid scale up of the program has put a lot of strain on the normal operations of MEDS. The staff at MEDS have very limited time to develop or improve their skills in specific areas of commodity management e.g. quantification, management information systems, monitoring and evaluation etc
- As the program expands, there is an increased need to get more staff skilled in specific areas of commodity management to support the supply chain activities. These are however not always available.

1. Continue working closely with MEDS staff on strengthening their ability to quantify, conduct M&E and improve various components in their MIS.
2. Support MEDS initiatives' to train facility staff in commodity management
3. Train more MEDS' staff in specific areas of commodity management e.g. quantification and forecasting of ART commodities

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MEDS to support the scale up of access to and rational use of ART in Kenya

various institutions including NASCOP, AMPATH, COGRI Nyumbani, Walter Reed Project, MSF (Spain and Belgium).

3. Strengthening the training, supervision and M&E Initiatives

- RPM Plus assisted MEDS in tracking commodities from suppliers into MEDS and between MEDS and the PEPFAR-assisted sites.
- RPM Plus also continued providing support to MEDS in monitoring the utilization of ARV drugs by sites, and sharing this information with MEDS.

4. Strengthening MEDS capability to support both the public and private ART sites through appropriate linkages and synergies
RPM Plus supported MEDS to service all sites including those in the public, FBO, community and private sectors. During this quarter, RPM Plus supported MEDS in reaching out to other partners supporting the program at various sites. One such linkage this quarter was Clinton Foundation, who finalized a memorandum of understanding with MEDS in working out ways of accessing more paediatric patients using the MEDS supply system, and ensuring minimal wastages of drugs through expiries.

Last Updated: 12/15/2006

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MOH/NASCOP to support access to , and rational use of, quality pharmaceutical**Activity Manager** Thuo, Michael**Activity #** 4**Task:** A1KE06HIP**Sub-Task:** 60AXH4**Activity Description** Activities will include:

? Support to the MOH/NASCOP centrally by:

1. Involvement in MOH/NASCOP Drug sub-committee activities;
2. Involvement in MOH/NASCOP Training sub-committee activities ;
3. Involvement in MOH/NASCOP Planning & Operations sub-committee activities.
4. Involvement in Paediatric and PMTCT commodity management activities
5. Involvement in MOH bilateral and multilateral commodity management activities undertaken through the National AIDS Control Council (NACC).

? Support to the MOH/NASCOP commodity management support supervision activities

? Develop ART Commodity Management job aids

? Support NASCOP training efforts by continuing the existing joint RPM Plus/NASCOP commodity management training efforts in the following areas in which RPM Plus has designed in-service training curricula:

- o Inventory Management for ART Drugs & Medical Supplies
- o ART Commodity Management for Health workers in Primary Health Care Settings
- o Implementing the use of an electronic tool for ART dispensing
- o Quantification training for central level pharmacists working in KEMSA, MEDS and NASCOP
- o Promoting Rational Use Of Medicines (PRDU) international training to central staff working in NASCOP, KEMSA, Teaching & Referral sites, PGHs and other high volume sites
- o Training Of Trainers (TOT) for Regional based Commodity Management training teams
- o Training of Pharmacy staff at ART sites on ART drug consumption data handling

? Implementation of Commodity management tools and approaches to support the national programme in areas of:

- o Quantification and Forecasting of ARV needs (Quantimed Tool)
- o Dispensing and commodity patient usage tracking at points of use (MSH- ART Dispensing Tool)
- o Manual Quantification Tools (MSH Quantification Workbooks)
- o Supply and inventory management tools (forms and registers)
- ? Support workshops to develop training curricula on specific areas in ART commodity management;
- ? Support efforts to develop/updating ART standard treatment guidelines,
- ? Support efforts to develop/update MIS and M&E commodity management indicators and instruments,
- ? Support efforts to develop patient medication counseling materials and methodologies.
- ? Implementation of the MTP (Monitoring, Planning, Training) Approach to training
- ? Support NASCOP ART Adherence and ADR monitoring efforts

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MOH/NASCOP to support access to , and rational use of, quality pharmaceutical

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MOH/NASCOP to support access to , and rational use of, quality pharmaceutical**Project
Year 7 Q1**

Activity Progress:

- Pediatric ART subcommittee: The meeting was held to discuss ways of accelerating the paediatric ART scale up rate.
- ART Drug subcommittee: Participated in joint NASCOP and stakeholder meeting to discuss development of a medium to long term HIV/AIDS commodity forecasting plan.
- Completed draft training curriculum for TOT on effective management of ART commodities
- Conducted a Training of Trainers course on Effective management of ART commodities in PHC settings in Kenya. 29 participants trained
- Conducted a workshop on adaptation of curriculum on Effective management of ART commodities in PHC settings in Kenya
- Training on Quantification of HIV/AIDS commodities for National and Program Level Staff. A total of 25 participants were trained on quantification for program and national level staff.
- Completed training curriculum and implementation guide on Standard Operating Procedures (SOPs) for ART commodity management staff.
- Completed draft SOPs for pharmaceutical services in support of ART programs in facilities
- Completed training materials on Rational drug use, ADRs, adherence and medication use counseling and pharmacotherapy of opportunistic infections.
- Completed review of MTP checklist
- Conducted 1 day training of data

- Staff turnover at Central Level has had a significant impact on operations of various ART taskforce subcommittees and has slowed down progress in various initiatives
- Slow progress in harmonization of ART tools continue to hamper rapid gathering of strategic information needed for planning at central level

- Continue to support and contribute to various National ART Task Force subcommittees
- Continue to support NASCOP in pharmaco vigilance issues by increasing linkages with TB and Malaria in order to have stronger advocacy for this issues a National level.
- Continue to support national training efforts by developing more targeted curricula and disseminating nationwide e.g. curricula on SOPs, Rational Drug Use.
- Continue to identify regional training teams for commodity management and build their capacity to train, mentor and supervise staff at regional level

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to build the capacity of MOH/NASCOP to support access to , and rational use of, quality pharmaceutical

collectors in readiness for baseline site assessments before implementing the MTP operational research in Kenya.

- Conducted baseline assessments in 10 Ministry of Health facilities and analyzed the findings
- Conducted a 2 day training on MTP for pharmaceutical staff from the 5 pilot sites under the MTP operational research
- Held a briefing meeting with NASCOP to discuss assessment findings and implementation plans developed by participants during the training

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Kenya COP**Year** 06**Activity Title** Conduct assessments in potential ART service delivery points to determine their readiness for the provision of Pharmaceutical**Activity Manager** Thuo, Michael**Activity #** 5**Task:** A1KE06HIP**Sub-Task:** 60CXA5**Activity Description** The rapid assessments (usually lasting for a duration of one day), are also intended to provide information on commodity management gaps existing at the sites, and to guide ART commodity management system strengthening efforts.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Kenya COP**Year** 06**Activity Title** Conduct assessments in potential ART service delivery points to determine their readiness for the provision of Pharmaceutical**Project
Year 7 Q1**

1.1 A) Assessments were done on 7th to 10th November 10 facilities
Assessments were done during baseline assessments of sites to be used to document the effectiveness of Monitoring Training and Planning (MTP) approach for improving HIV/AIDS Pharmaceutical management practices.

B) Two other assessments were done. The assessments were done to establish the extent of site readiness, institutional capacity and human capacity development needs ahead of start up of ART

? Key areas assessed included:

- a) Human Capacity Development (Numbers, cadres and training status)
- b) Infrastructure supporting ART commodity management
- c) Availability and use of policies and guidelines for ART commodity management
- d) Status and use of Pharmaceutical management information systems
- e) Availability and use of SOPs that support ART commodity management
- f) Inventory management and distribution
- g) ART dispensing and counseling practices

? Review of ART Inventory records was done in all facilities visited.

C. Another set of assessments is currently being done (11th to 15th December 2006) in 42 health facilities in Nairobi Province under the provincial medical officer (PMO). The key objectives of these assessments are:
? To assess the availability of policy

? Observation of dispensing encounters and execution of patient exit interviews was not possible in Nyanza PGH as it was not an ART clinic day.

? Share assessment findings with site managers and National AIDS and STD Control Program
? Training of staff dispensing ARVs from 5 of the 10 facilities (Rift Valley PGH, Machakos DH, Nyeri PGH, Kiambu DH and Muranga DH) in Monitoring Training and Planning
? Development of site based MTP implementation plans for the 5 pilot sites above
? Dissemination of Nairobi Province assessment findings with provincial medical officer and other stake holders.

Workplan: Kenya COP**Year** 06**Activity Title** Conduct assessments in potential ART service delivery points to determine their readiness for the provision of Pharmaceutical

and standards in support of pharmaceutical and laboratory services
? To determine the human resources available in support of pharmaceutical and laboratory services in terms of capacity and training
? To determine the infrastructure available in support of pharmaceutical and laboratory services
? To assess the status and use of MIS in support of pharmaceutical and laboratory services
? To assess prescribing and dispensing practices
? To assess the quality assurance practices for laboratory services (specimen management, equipment maintenance, testing and GLP)
? To assess the commodity availability in support of pharmaceutical and laboratory services

1.2 Identification and documentation of gaps and challenges in the key areas assessed.

This was done in the 10 facilities.

1.3. Stipulation of recommendations/interventions to address the identified gaps and challenges was done in all the sites.

1.4. Progress on products

? 10 site assessments reports were written and are available.

? Assessment report for Nairobi's, Police General Service Unit clinic; in progress

? Assessment reports for Nairobi province health facilities: To be written

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening pharmaceutical services at site level in support of ART scale up**Activity Manager** Thuo, Michael**Activity #** 6**Task:** A1KE06HIP**Sub-Task:** 60CXH6**Activity Description** Technical assistance activities will include:

Initiating and strengthening commodity management activities at ART sites in support of program scale up:-

- o Commodity management training to address human resource needs at sites;
 - o assist in setting up site based ART commodity management structures (eg, Drugs & Therapeutic Committees);
 - o developing site-based commodity management implementation plans, where necessary
 - o providing strategic ART policy, professional and operational information / material as needed by the sites
- Initiating commodity management plans of action collaboratively with site staff to address:-
- o Development and /or adaptation of SOPs and forms ;
 - o use of inventory management tools
 - o patient medication counseling for adherence,
 - o commodity management monitoring and evaluation systems, including ART Drug Utilization Reviews (DUR)
 - o the design and implementation of robust ART Drug Management Information Systems
 - o on going training and monitoring for performance improvement at site level—this may employ the MTP methodology

Supporting ART treatment partners by assisting in :

- o training of clinical service providers in commodity management for ART,
- o monitoring and development of strategies to promote rational drug use for ART

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Kenya COP

Year 06

Activity Title Provide technical assistance to national efforts in strengthening pharmaceutical services at site level in support of ART scale up

**Project
Year 7 Q1**

Activity Progress

1.0 Initiating and strengthening commodity management activities at ART sites in support of program scale up

- Trained 14 staff from 8 ART sites on MSH/ART Dispensing Tool
- TA assistance through provision of software and training of IT staff to LVCT ART program, Coptic Hope Centre ART program and AIDSRelief program on implementation of MSH/ART dispensing tool in their ART sites
- Dissemination of ART commodity management tools (dispensing tools, job aids, & inventory management tools) to 46 ART Sites
- Implementation of Inventory Tracking Tool (ITT) at Eastern Deanery AIDS Relief Program (EDARP) for commodity management of 9 satellite sites.

2.0 Initiating commodity management plans of action collaboratively with site staff to address:-

- Assisted pharmaceutical staff from 2 provincial general hospitals and 3 district hospitals in development and "jump starting" of on site Monitoring, Training and Planning (MTP) action plans

3.0 Support to ART treatment partners

- Ongoing technical assistance to ART program pharmacist at AIDSRelief on follow up and expansion of MTP activities at 3 mission hospitals
- Ongoing technical assistance to AIDS Relief Pharmaceutical Technical Advisor on use of MSH/ART Dispensing tool to support PMIS at all sites in Kenya
- Provided technical assistance to ART program pharmacist at AMPATH on dissemination of job aids for ART commodity management to satellite sites.

Progress On Products

- Limitations in ability to assist sites with infrastructure and equipment needs which is a major constraint to program scale up
- Lack of National standardized pharmaceutical ART SOPs and forms to harmonize activities in support of ART
- Lack of National policy on tracking Adverse Drug Reactions (ADRs) in support of ART
- Lack of clear National guidelines on best practices standards for ART sites
- Lack of a support supervision structure for pharmaceutical services to ensure sustained improvements in ART commodity management practices

- Conduct training on Standard Operating Procedures for ART commodity management
- Develop support supervision manual and training guide for ART commodity management
- Continue responding to requests for training in ART commodity management by ART partners nationwide
- Continue roll out and follow up MTP implementation at selected sites
- Continue to disseminate ART commodity management tools nationwide
- Continue to work with sites to build robust ART drug management information systems in support of ART using available electronic or manual tools
- Continue to strengthen skills in data & information management for ART commodity management staff as the initial step to implementing ART drug utilization reviews
- Roll out ITT to other similar programs and regional stores incorporating the lessons learnt from EDARP.

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening pharmaceutical services at site level in support of ART scale up

- Training report on MSH/ART dispensing tool, November 29th 2006 available.
- Technical report on MTP training and implementation plans 30th November to 1st December 2006 available
- List of facilities received ART commodity management job aids: Available on request in Database

Last Updated: 12/15/2006

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening laboratory services in support of ART programs**Activity Manager** Thuo, Michael**Activity #** 8**Task:** A1KE06HIP**Sub-Task:** 60DXH8**Activity Description** Technical assistance will include:

? Support to National Level Laboratory activities:

o Support to the ART commodity management activities of the various working sub-committees of the laboratory inter-agency coordinating committee.

o Support to national level efforts to implement the national laboratory policy jointly with MOH/NPHLS and partners

o Support to national level efforts to implement a national laboratory policy strategic plan jointly with MOH/NPHLS and partners

o Support national level activities aimed at improving institutional capacity by adopting and disseminating laboratory SOPs.

o Support the national efforts to improve existing laboratory management information systems

o Provide support to NPHLS in capacity building to strengthen the management and coordination of the laboratory network;

o Contribute to the development and implementation of in-service laboratory training curriculum and materials;

o Strengthen the national efforts to implement external quality assurance procedures

? Supporting NPHLS activities aimed at strengthening and scaling up laboratory activities at priority ART sites

o Train laboratory staff to address human resource knowledge and skills for ART;

o Train laboratory staff on implementation of SOPs, for quality and efficiency of laboratory services.

o Assist in improving existing laboratory record keeping and management information systems

o Train laboratory staff on good laboratory practices o provide strategic ART policy, professional and operational information /materials as needed

o Develop SOPs on equipment maintenance

o Strengthen sites to implement internal and external quality assurance procedures

o Provide support to laboratory supervisors and strengthen their managerial skills and coordination of the laboratory services.

? Implementing good laboratory practices in support of ART at the site level

o Adapt and disseminate laboratory guidelines and standard operating procedures

o Institutionalize laboratory quality assurance procedures including performance of internal QCs and calibration of equipment

o Strengthen inventory management systems to reduce outages of reagents and procedures to maintain equipment to

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening laboratory services in support of ART programs

reduce breakdown episodes.

- o Provide on going training for performance improvement including Good Laboratory Practices and Universal Precautions.

- o Provide on going training on the use of laboratory MIS, M&E tools and the use of routine laboratory data.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Kenya COP

Year 06

Activity Title Provide technical assistance to national efforts in strengthening laboratory services in support of ART programs

**Project
Year 7 Q1**

Support to National efforts through participation in Lab ICC: None

- Convened and supported one Lab ICC meeting – Nov. 29. Minutes available

T.A. support to Capacity strengthening efforts for NPHLS:

- Disseminated to partners the pre-tested 5-day Comprehensive lab strengthening curriculum in support of ART program
- Continued to edit the TOT lab curriculum materials pre-tested in the previous quarter 4.
- Finalize the design and technical review of six(6) job aids in support of ART lab monitoring. Documents undergoing incorporation of final comments from the technical reviews
- Supported NPHLS compile, technically review, and edit a set of Lab ART SOPs guide for national use. Review completed and consensus achieved. Document undergoing incorporation of the review comments . Proceedings report available

T.A. support to capacity strengthening of NPHLS and selected ART sites

- Training on use of ART lab SOPs for 26 laboratory technologist/technicians from 11 coast province ART sites. Draft proceedings report awaiting finalization.
- Pre-tested a Curriculum on Use of Lab SOPs in support of the ART program- curriculum undergoing editing and incorporation of feedback from the field test
- Disseminated generic SOPs to 9 ART coastal sites for adaptation and as reference.. List of facilities who benefited available
- Support to Nairobi Province Medical

Support to Lab ICC:

- Continue to serve as secretariat for Lab ICC and convener for Lab sub-committee on systems strengthening
- Participate jointly with other partners in on-going Lab ICC and other sub-committee meetings as necessary
- Present progress report on Lab ICC Systems sub committee to the central ICC as may be required

Support to activities for strengthening capacity of NPHLS :

- Finalize the draft TOT lab curriculum and training materials for use by NPHLS in 2007
- Jointly with NPHLS , pre-test the Curriculum on Lab supplies Commodity/ Inventory Management Training
- Train 30 personnel from NPHLS and faith –based sites in facility teams for improving the commodity/inventory management for lab supplies in support of ART
- Implement the MTP approach to 3 ART sites as a way of continuous performance improvement for site level staff resulting in enhanced facility

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening laboratory services in support of ART programs

Laboratory staff in preparing and pre-testing a tool for conducting a Rapid Assessment on laboratory capacity strengths and gaps to support ART program. A draft tool tested and currently in use. Draft proceedings report on training for data collection and testing tools awaiting finalization.

- Supported Nairobi Provincial Medical office to conduct a rapid assessment on lab capacity for ART covering 42 existing and potential ART sites in Nairobi province. Minutes of planning 2 meetings available
- Convened meetings with Director NPHLS as advocacy for involvement of NPHLS, UNITID sites, Hope services, Eastern Deanery , and 2 MOH facilities , in Commodity Management Training in Feb 2007-Interest of NPHLS and other facilities established/affirmed. Notes on the meeting written.

performance

- Support training on quality control in CD4 Testing for priority ART sites as requested by NPHLS
- Support NPHLS print and disseminate 6 Lab ART Job Aids each to 260 ART sites nationally to improve quality ART lab monitoring
- Develop 3 additional Job Aids listed as priority
- Develop a practical handbook on the job aids for on the job training and a job aid for field supervision
- Support NPHLS print and disseminate ART SOPs to 260 ART facilities

Support to NPHLS and selected sites :

- Finalize SOP Training curriculum and proceedings report
- Meet with selected facilities prior to the Lab Commodity management Training for site data collection
- Support the Nairobi province data management from the a rapid assessment for laboratory in support of ART and assist with report preparation and dissemination materials
- Field test a point of use lab tool in one selected site

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Kenya COP**Year** 06**Activity Title** Provide technical assistance to national efforts in strengthening laboratory services in support of ART programs**Last Updated:** 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Kenya COP**Year** 06**Activity Title** Respond to requests to participate and support Emergency Plan national coordination meetings, workshops, site visits/study tours as**Activity Manager** Thuo, Michael**Activity #** 9**Task:** A1KE06HIP**Sub-Task:** 60F8N9**Activity Description** . Specific requests in areas that RPM Plus has technical leadership will also be supported under this activity. For example, RPM Plus has been requested from time to time provide commodity management for the NASCOP team, AIDSRelief team, USAID partners (eg FHI, EGPAF, AMPATH, Lea Toto) , Eastern Deanary, US-DOD/Kericho, CDC-Kisumu, PMTCT initiative, etc

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Kenya COP**Year** 06**Activity Title** Respond to requests to participate and support Emergency Plan national coordination meetings, workshops, site visits/study tours as**Project
Year 7 Q1**

1. Responding to requests from Kenya PEPFAR Inter-agency team
RPM Plus responded to the following technical requests from the Inter-agency team:

- Provide regular reports to NASCOP and other key stakeholders on the commodity status under PEPFAR.
- Provide regular updates to the Inter-agency team on the status of the commodity supply for the PEPFAR assisted sites.
- Provide communication to other partners on the commodity supply related issues e.g. advise sites on scale up following shortages of specific first line ARV drugs supplied under PEPFAR.
- Attend a quarterly briefing meeting at the USAID-Kenya offices, and updating the USG-Kenya mission on RPM Plus activities. The meeting was held on 5th December 2006.
- Attend a meeting with Clinton Foundation to discuss ways of supporting the scale up considering the new initiatives by Clinton Foundation and others in UNITAID.
- Attend an urgent meeting at NASCOP to discuss the impending shortage of ARV drugs through Global Fund for scale up patients, following the attainment of the planned target for scale up, with no additional ARV drugs in the pipeline.
- Prepare presentations on behalf of the USG team on various topics, as requested. These included the following meetings held during this quarter:
 - National PMTCT Grand Round meeting held for all PMTCT stakeholders held on 30th November 2006.
 - A quarterly USG PMTCT Stakeholder meeting on 19th December 2006.

None

- Continue working closely with the Inter-agency team, MEDS, NASCOP, other partners and sites in ensuring uninterrupted program expansion in support of the national program goal.
- Provide progress reports on the Kenya PEPFAR program to the USG Interagency team and NASCOP.

Workplan: Kenya COP**Year** 06**Activity Title** Respond to requests to participate and support Emergency Plan national coordination meetings, workshops, site visits/study tours as

- Participate in a meeting held at NASCOP to discuss the review the plans for development of a medium term commodity forecast

2. Participation in important meetings
RPM Plus, Kenya participated in a Kenya APHIA II partners meeting held at USAID offices on 6th December 2006. The meeting was for all the USG APHIA II partners to understand the various organizations/consortia that are working in the regions, and at national level.

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Kenya **Year** 06**Activity Title** Technical Activity Coordination and Monitoring**Activity Manager** Tetteh, Gladys **Activity #** 1 **Task:** A1KE06RPM **Sub-Task:** 9XXY1**Activity Description** This activity includes technical activity coordination, workplan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators.

This is expected to occur throughout the year.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Ongoing coordination within MSH/RPM Plus Kenya teams as well as MSH/LMS project teams to leverage experiences and lessons learnt. Coordination with other RPM Plus Malaria MAC and PMI programs in Africa - East (DRC, Burundi, Rwanda, Tanzania, Uganda, South Sudan, Ethiopia) and West Africa (Senegal, Ghana, Nigeria) to share lessons and adopt best practices. Coordination with Arlington Malaria team on workplanning, budgeting etc.	None	Continued technical coordination.		

Last Updated: 12/20/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Kenya **Year** 06**Activity Title** Participate in appropriate meetings and working groups**Activity Manager** Tetteh, Gladys **Activity #** 2 **Task:** A1KE06RPM **Sub-Task:** XXXXXX**Activity Description** To strengthen national level collaboration in support of Kenya's national malaria strategy, RPM Plus will participate and contribute to meetings concerned with malaria treatment and prevention and policies.

RPM Plus will participate in these Drug Policy Technical Working Group meetings to strengthen policy dialogue and to support the development of appropriate tools and interventions that promote the effective case management of malaria. RPM Plus will offer drug management expertise to discussions.

This is expected to occur throughout the year.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter RPM Plus continued to provide support to the DOMC through the Drug Policy and Technical Working Group. A major DPTWG meeting to discuss ACT implementation was held in November 2006. In addition, RPM Plus attended a meeting of the DPTWG's drug management sub-committee. RPM Plus held one on one meetings with the Division and with KEMSA to monitor the progress of ACT implementation and plan next steps.	None	Continued participation in DPTWG meetings.		

Last Updated: 12/20/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Kenya**Year** 06**Activity Title** Strengthen the Division of Malaria Control's Monitoring and Evaluation System**Activity Manager** Tetteh, Gladys**Activity #** 3**Task:** A1KE06RPM**Sub-Task:** XXXXXX**Activity Description** RPM plus will continue to support the DOMC by implementing the developed M&E system.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, RPM Plus supported preparatory work in the establishment of the DOMC MIAS. The procurement of computers and laptops by RPM Plus for the DOMC and their networking was achieved. USAID branding regulations were adhered to.	None	Continued support to the MIAS.		

Last Updated: 12/20/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Kenya **Year** 06**Activity Title** Develop the M&E capacity of DOMC and it's partners**Activity Manager** Tetteh, Gladys **Activity #** 4 **Task:** A1KE06RPM **Sub-Task:** XXXXXX**Activity Description** RPM Plus will support a technical training program for DOMC staff and partners to strengthen the overall capacity at DOMC for performing M&E activities

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus embarked upon a recruitment process for a Program Associate for MIS/M&E at the DOMC to support MIAS implementation. Over 50 applications were received. Interviews were held for the top 5 short-listed candidates on December 14, 2006. DOMC and MSH/RPM Plus constituted the panel. A successful candidate was identified and the recruitment process is being finalized.	None	Finalization of recruitment process such that Program Associate is on board to facilitate the MIAS system implementation beginning January 2007.		

Last Updated: 12/20/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Cambodia**Year** 05**Activity Title** Participate in Child Survival and other meetings to increase pharmaceutical management awareness among counterparts**Activity Manager** Lynders, Marion**Activity #** 2**Task:** A1KH05XXX**Sub-Task:** 60EXN2

Activity Description RPM Plus will meet with the MOH, WHO and other child health partners to disseminate key findings, discuss potential recommendations and design interventions to improve pharmaceutical management in support of child health. Building on the CSP/MOH strategy development process to-date, RPM Plus will share findings of the C-DMCI survey with key stakeholders, and work in concert with child survival partners to think through and prioritize pharmaceutical management issues. It is anticipated that partners will develop a strategy and recommendations for interventions to improve pharmaceutical management in support of child health.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus travelled to Cambodia during October 13-29, 2006 and met with Mission staff to discuss current RPM Plus activities and introduce the newly appointed MSH consultant. The Mission suggested, and RPM Plus agreed to disseminate results from the C-DMCI survey through existing government channels. RPM Plus was requested to submit a short proposal describing an intervention to conduct a systematic analysis of key pharmaceutical management systems components to identify and analyze options to improve the supply system. The expected results of this proposed activity would include a prioritized strategic plan for improvement of pharmaceutical management in collaboration with the USAID Mission, Royal Government of Cambodia, donors and other stakeholders	none	RPM Plus will follow up with the Mission to determine funding for this proposed activity.		

Last Updated: 01/15/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Cambodia**Year** 05**Activity Title** Conduct a strategy development workshop to address identified pharmaceutical management issues**Activity Manager** Lynders, Marion**Activity #** 3**Task:** A1KH05XXX**Sub-Task:** 60CXM3**Activity Description** The workshop will provide an opportunity for RPM Plus and in country partners to collaborate on developing interventions through existing programs to address the gaps in drug management.

It is anticipated that key partners will actively participate to identify priorities and explore ways in which RPM Plus may provide TA to improve pharmaceutical management. RPM Plus is currently working with the MOH to define the goals and expected outcomes of this meeting.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	In discussions with the Mission, instead of holding a strategy development workshop as was originally intended, RPM Plus agreed to use these activity funds to disseminate the results and suggested recommendations from the C-DMCI survey through existing mechanisms, such as technical working groups. So far, RPM Plus has presented results and recommendations of the C-DMCI survey to the Cambodian child survival management committee, a meeting hosted by MediCam where 30 individuals from several donor agencies attended, a national conference which focused on rational use of medicines and the pharmaceutical management of malaria training course. In addition, RPM Plus developed a two page summary of the report and sent electronic copies to all key stakeholders. MediCam, the umbrella organization for all NGOs in Cambodia agreed to publish the summary in its monthly newsletter.	None	Provide technical assistance to MediCam prior to publication of the C-DMCI survey		

Last Updated: 01/15/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Cambodia**Year** 05**Activity Title** Provide TA with the development of selected drug management interventions**Activity Manager** Lynders, Marion**Activity #** 4**Task:** A1KH05XXX**Sub-Task:** 60EXH4

Activity Description RPM Plus will provide TA to counterparts to develop selected interventions to strengthen pharmaceutical management in support of child survival. Although the nature of the intervention development undertaken will only be determined following examination of the findings, it is possible that RPM Plus may provide TA to child survival partners to develop and implement interventions within their planned activities to leverage funds and increase the potential reach of these interventions

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	As Cambodia is a priority country for USAID child survival activities, as well as the Partnership for Maternal Neonatal and Child Health (PMNCH), USAID, through its Strategic Objective 3, has provided funds to improve access to medicines for child health through the private sector in Cambodia. In December, RPM Plus and Mission staff agreed that funds from this activity would be used to supplement the SO3 funded activity to train counter sales agents from private pharmacies in three western border provinces-Battambang, Pailin and Bantay Mean Chey. As a result, this activity will be closed.	none	Add funds with SO3 activity		

Last Updated: 01/15/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Mali **Year** 04**Activity Title** Technical support for the development of Mali's antimalarial procurement plan**Activity Manager** Shretta, Rima **Activity #** 5 **Task:** A1ML04MAC **Sub-Task:** 60C2H5**Activity Description** RPM Plus will provide support to the Mali MOH for the development of a procurement plan for the new first-line treatment.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Discussed with NMCP and the USAID about development of a PSM	None	RPM Plus will start the PSM plan with the NMCP		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Mali**Year** 05**Activity Title** Apply the community drug management assessment tool to determine antimalarial drug use practices in the community and the**Activity Manager** Ndoye, Thidiane**Activity #** 2**Task:** A1ML05MAC**Sub-Task:** 60F6H2**Activity Description** RPM Plus will apply the malaria community drug management assessment tool to determine what proportion of the community accesses treatment through the private sector, how the private sector provide TA for the calculation of costs for the implementation of ACTs including the costs of procurement, training and all other aspects of implementation.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
RPM Plus supported a study to assess the use and availability of antimalarials in the community and the private sector. The results have been shared at the national level with stakeholders and the report is now available for dissemination.	None			

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** MAC-Field Support-Mali**Year** 05**Activity Title** Technical support for implementation of the new antimalarial drug policy**Activity Manager** Ndoye, Thidiane**Activity #** 3**Task:** A1ML05MAC**Sub-Task:** 60F4H3**Activity Description** RPM Plus/MAC will provide ongoing TA to the implementation of ACTs including drug management activities (using funds from FY04)

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus is providing support to finalize the training modules tailored for the private sector. Training will be organized with NMCP, WHO and MRTC prior to ACT introduction in the public and private sectors	None	finalize the training modules for the private sector.		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Namibia COP**Year** 06**Activity Title** Strengthen policy and management support systems**Activity Manager** Nwokike, Jude**Activity #** 3**Task:** A1NA06HIP**Sub-Task:** 60AXH3**Activity Description** Continued support will be provided to the Pharmaceutical Services Division of MoHSS in the implementation of management support systems. Support will be provided for the positions of pharmaceutical management advisor to support the Policy Coordination Subdivision and the Quality Surveillance Laboratory Manager.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
<ul style="list-style-type: none">Continued support to the National Medicines Policy Coordination sub-division with plans for the review and update of the national Essential Medicines List	None	Continued support for the review and update of the national Essential Medicines List		

Last Updated: 01/31/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Nicaragua **Year** 04**Activity Title** Provide technical assistance to the Nicaraguan Technical Working Group on Essential Medicines (continuation of Activity 4, Year 3)**Activity Manager** Miralles, Maria **Activity #** 2 **Task:** A1NI04XXX **Sub-Task:** 60B4H2**Activity Description** RPM Plus will continue providing technical assistance upon USAID Nicaragua Mission request. This could be related to the mechanisms to implement an improved procurement system for the potential program to expand non-for profit medicine outlets, or it may be related to the changes needed to modernize the capacity of the current warehouse and distribution system in the MOH.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The standardized manual for training of VSM dispensers was completed.	No constraints	The implementation of the manual will start with a ToT on March 07. FY06 resources were programmed for the follow up.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Nicaragua**Year** 05**Activity Title** Technical assistance for the strengthening of the supply management and financial administration of the VSM**Activity Manager** Barillas, Edgar**Activity #** 2**Task:** A1NI05XXX**Sub-Task:** 60CXH2**Activity Description** RPM Plus will analyze the performance of the Ventas Sociales de Medicamentos networks. With this information RPM plus will elaborate recommendations to strengthen the supply management and financial administration of the VSM. The proposal will be developed with local counterparts.**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
The local consultant hired for this study, is still working on the final report. The deadline for the submission is already overdue. The final version of the report should be delivered by the end of December/ 06.	The first draft of the report was submitted on November 2006. It did not met the ToR, so RPM Plus did not accepted as a final product.	RPM Plus provided extensive comments to the first version of the report. A local health economist was hired for 5 days to support the analysis of the information		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Nicaragua**Year** 05**Activity Title** Standardization of procedures and forms used by the VSM quality assurance program**Activity Manager** Barillas, Edgar**Activity #** 3**Task:** A1NI05XXX**Sub-Task:** 60DXH3**Activity Description** The Ventas Sociales de Medicamentos networks have already developed components of a comprehensive QA program. RPM Plus will provide TA to standardize the procedures among the different networks, develop an indicator base system to monitor the QA program, and to document the experience.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The final version of the report was completed, edited and distributed to USAID and local counterparts.	No constraints	The implementation of the "Standardized Manual for Quality Assurance", will start on February 2007 with the presentation of the Manual, and training to the pharmacists. RPM Plus will support the implementation process.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Nicaragua**Year** 05**Activity Title** Technical assistance for the implementation of the standardized quality assurance program of the VSM**Activity Manager** Barillas, Edgar**Activity #** 4**Task:** A1NI05XXX**Sub-Task:** 60DXH4

Activity Description The quality assurance program manual was completed and validated by all the VMS networks on August 2006. During FY06 RPM Plus will provide technical assistance for the systematic application of the norms and procedures, develop an indicator base system to monitor the QA program, and implement an assessment of the impact in the quality of the medicines dispensed by the VSM. A local consultant will be hired to support this activity. The USAID Mission in Nicaragua agreed that unused resources from FY05 (USD 20,000.00 approximately), for the Strengthening of MoH Pharmaceutical and Therapeutic Committees, as mentioned before) will also be used to support this activity, including the purchase of a MiniLab® set and technical assistance on its use.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	No activities were planned for this quarter	No constraints	The implementation of the "Standardized Manual for Quality Assurance", will start on February 2007 with the presentation of the Manual, and training to the pharmacists. RPM Plus will support the implementation process.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Nicaragua**Year** 06**Activity Title** Technical assistance for the implementation of the standardized quality assurance program of the VSM**Activity Manager** Barillas, Edgar**Activity #** 2**Task:** A1NI06XXX**Sub-Task:** 60DXH2

Activity Description The quality assurance program manual was completed and validated by all the VMS networks on August 2006. During FY06 RPM Plus will provide technical assistance for the systematic application of the norms and procedures, develop an indicator base system to monitor the QA program, and implement an assessment of the impact in the quality of the medicines dispensed by the VSM. A local consultant will be hired to support this activity. The USAID Mission in Nicaragua agreed that unused resources from FY05 (USD 20,000.00 approximately), for the Strengthening of MoH Pharmaceutical and Therapeutic Committees, as mentioned before) will also be used to support this activity, including the purchase of a MiniLab® set and technical assistance on its use

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The final version of the report was completed, edited and distributed to USAID and local counterparts.	No constraints	The implementation of the "Standardized Manual for Quality Assurance", will start on February 2007 with the presentation of the Manual, and training to the pharmacists. RPM Plus will support the implementation process.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Nicaragua**Year** 06**Activity Title** Technical assistance for assessing the impact of the application of the standardized manual for the training of VSM dispensers**Activity Manager** Barillas, Edgar**Activity #** 3**Task:** A1NI06XXX**Sub-Task:** 60G3H3**Activity Description** This training manual was completed and validated by all the VSM networks on August 2006. RPM Plus will provide technical assistance to develop an indicator base system to monitor the training process, and implement an assessment on the knowledge, practice and attitudes of the participants. A local consultant will be hired to support this activity.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The final version of the report was completed, edited and distributed to USAID and local counterparts.	No constraints	The implementation of the "Standardized Manual the Training of Dispensers of VSM", will start on March 2007 with the training of the facilitators. RPM Plus will support the implementation process, including the monitoring and evaluation of impact.		

Last Updated: 12/12/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Rwanda COP**Year** 05**Activity Title** To provide TA to improve CAMERWA's management and services, with especial focus in procurement, distribution, inventory control,**Activity Manager** Ntumba, Georges**Activity #** 3**Task:** A1RW05HIP**Sub-Task:** 60CXH3**Activity Description** RPM Plus will continue to support CAMERWA in order to improve the management capacity and efficiency of its services. An external consultant will be based in CAMERWA for a period of 3-6 months, with focus in the following areas of action:

1- TA for reviewing/developing operating procedures: The implementation of regional depots, the expansion of stores, and the increased number of clients as a consequence of the scaling up of ART will require adaptation and implementation of operating procedures in depots, revision and update of other procedures that need to be modified, and development of new procedures in order to integrate all CAMERWA's new activities.

2- TA in procurement and distribution of drugs: In order to respond to the targets of scaling up ART, a national procurement plan needs to be developed and reviewed periodically according to achievements and challenges, which should include among other information quantification of drugs and procurement strategy. It will be necessary as well to develop and implement a distribution system consistent with the new decentralization plans of the MOH.

3- TA for QA/QC: Although a national QA/QC system should be implemented at national level by the Direction of Pharmacy through a National Drug Authority, CAMERWA has established an internal mechanism to guarantee the minimum requirements on quality of drugs. CAMERWA has requested MSH/RPM Plus to provide additional training in QA/QC and technical assistance to improve their internal system. The improvement of the QA/QC system will require to review and update the procedures according to international regulations (or national when developed), to adapt some elements to ensure quality at regional depots, and to establish a system for M&E.

4- TA for store management: Store management procedures should be reviewed according to the expected increase of volumes of drugs and clients in next years, as a consequence of scaling up ART and other programs.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Workplan: Rwanda COP

Year 05

Activity Title To provide TA to improve CAMERWA's management and services, with especial focus in procurement, distribution, inventory control,

**Project
Year 7 Q1**

MSH has facilitated a 3 days workshop to help CAMERWA to develop its strategic plan for the period of 2007-2010. This exercise helped CAMERWA to realise the need to review its organisational structure and harmonize its internal functions and operations. This also fits with the recommendation made by MSH Human Capacity Development team. As matter of consequence the existing SOPs are being or will be adjusted to reflect the new organisational structure to be adopted soon. The first draft of the strategic plan is expected in January 2007.

This activity is behind schedule because of different changes in the activity scheduling by CAMERWA. MSH/RPM Plus consultant is now on duty at CAMERWA but he cannot start the process of developing the QA plan before the end of the restructuring process. Once this process is finalised, it will become clear where this function will be housed , how it will be implemented and which procedures need to be developed and implemented to support the system. There will be also a need to wait for SCMS to be operational at CAMERWA before finalising this activity.

MSH/RPM Plus Consultant, Mr. Yves Barjaud is working with CAMERWA to develop its procurement plan according to the requirements of the National Tender Board. Technical discussions facilitated by the Consultant are under way between CAMERWA and the National Tender Board to agree on the principles to be included in the plan. The new procurement plan will be submitted to the National Tender Board by Fevrier

*Lack of consistency in activity planning by CAMERWA : starting the implementation of SOPs before the strategic plan, and shifting priorities which creates frequent delays in the implementation.

*Frequent changes in activity scheduling at CAMERWA level.

*Unavailability of CAMERWA to work with the Consultant.

*Short period of the visit due to unavailability of CAMERWA staff to spend more time in South Africa. Which didn't allow the joint team to explore all the aspects related to the distribution of pharmaceutical products in both private and public sector.

*Complete the strategic plan. Adjust SOPs to the new organisational structure. Follow up on the implementation of the adjusted SOPs specially with regard to the Active distribution.

*Work in collaboration with SCMS to develop and implement a QA system at CAMERWA.

*Complete the procurement plan. Submit it to the National Tender Board. Follow up on the implementation.

*Debriefing from the team. Integration of lessons learned. Finalisation of the distribution plan. Testing in selected districts. Launching the system. Monitoring and follow up.

Workplan: Rwanda COP**Year** 05**Activity Title** To provide TA to improve CAMERWA's management and services, with especial focus in procurement, distribution, inventory control,

2007 for approval.

A joint made of CAMERWA and MSH staff visited South Africa to learn from the local experience on the active distribution of the pharmaceutical commodities in both private and public sector. This activity was sponsored by SCMS and MSH/RPM Plus. The outcome and lessons learned from this visit will be used to develop and implement the active distribution system which is scheduled to start in the first semester of 2007. MSH/RPM Plus also helped CAMERWA to analyse the gaps observed during the first distribution of the COARTEM by CAMERWA and to integrate learning for the next round of distribution of COARTEM to take place in January 2007.

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** To support the plans for stores expansion and improvement of quality storage in CAMERWA with the procurement of some**Activity Manager** Ntumba, Georges**Activity #** 4**Task:** A1RW05HIP**Sub-Task:** 60CXX4**Activity Description** RPM Plus plans to procure some equipment to CAMERWA in support to the plans for stores expansion. The external consultant (activity 3) will also provide recommendations for the selection of the adequate equipment according to the needs and development of the plans for store expansion and implementation of regional depots. This will require an important investment on equipment such as, but not limited to, furniture (shelves, cabinets and tables), temperature-alarm for cold room, pallets, forklift trucks, refrigerators, generators and an incinerator.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Suppliers have been identified for distribution and storage equipments needed for Active distribution. Procurement process has been launched and will be completed in the first quarter of 2007.	Delay in delivery because of equipments need to be purchased outside Rwanda.	Buy and deliver material and equipment to CAMERWA. Assist in the Installation and operationalisation.		

Last Updated: 01/10/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP **Year** 05**Activity Title** To assist CAMERWA in the development of an organizational development plan, by conducting a HR assessment and implementing**Activity Manager** Ntumba, Georges **Activity #** 5 **Task:** A1RW05HIP **Sub-Task:** 60CXM5**Activity Description** A participatory assessment is planned to be conducted during COP05 with the objective of guiding CAMERWA staff in the self-identification of their management problems, and to develop an agreed plan for developing the HR Capacity. RPM Plus will also provide support in the follow up of the implementation plan, and will provide funding for training and other activities aiming to build the capacity of the staff.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

This activity was completed during the last reporting period.

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Rwanda COP**Year** 05**Activity Title** To provide TA for the development of governance documents for the definition and implementation of a functional Coordinated**Activity Manager** Tarrafeta, Belen**Activity #** 6**Task:** A1RW05HIP**Sub-Task:** 60C2F6**Activity Description** The establishment of the Coordinated Procurement and Distribution System requires a solid structure for decision making and technical work. It is essential that all national and international members of the CPDS agree on the principles that will sustain the system, including the organization of the structures, the functions of the technical committees and the management commission, and roles and responsibilities of each of the members. RPM Plus will take the lead in developing the governance document that should be officially adopted by the national authorities with the agreement of all development partners involved.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

See the last quarter report (July-Sept 06).

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** To provide TA for the implementation of the CPDS with especial focus in quantification, procurement and distribution of**Activity Manager** Tarrafeta, Belen**Activity #** 7**Task:** A1RW05HIP**Sub-Task:** 60C2H7**Activity Description** While the CPDS is officially established, RPM Plus will assume the leadership of some important functions, including quantification of needs, follow-up on the procurement process with CAMERWA, and monitoring the inventory level, distribution and consumption of ARVs against projections. However, once the CPDS will be officially adopted, RPM Plus will start to transfer capacities and responsibilities to the members of the public sector appointed by the GOR, in order to ensure the sustainability of the system. RPM Plus will also ensure that the CPDS is well integrated into the pharmaceutical management system.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

Based on the recommendation of joint technical committee, MSH - CAMERWA , a Data Assistant was provided by MSH to CAMERWA to enter patient records and monthly consumption data from July to December 06 by using the updated ART tracking tool. The first phase of this activity will be completed by January 2007.

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** Develop and implement a monitoring and evaluation reporting system for the coordinated procurement mechanism**Activity Manager** Tarrafeta, Belen**Activity #** 8**Task:** A1RW05HIP**Sub-Task:** 60C2I8

Activity Description The CPDS will be based on an indicator-based monitoring system for key major areas of management of ARVs. These include quantification, procurement, distribution and consumption. The monitoring system will be supported and integrated within the existing systems for data collection and reporting, and the implementation of SOPs. In addition, periodic reports will be developed by the technical members of the CPDS in order to inform donors and the GOR on the technical performance of the system. External audits will also be conducted on a yearly basis.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

Once the data entry process is completed by the Data Assistant, patient records, monthly consumption data and as well as an ARV stock level analysis will be used to produce monthly reports to be submitted to the Implementation Committee and to the CPDS

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** To provide TA to the MoH for implementation of an integrated system of pharmaceutical management including the update of SOPs**Activity Manager** Tarrafeta, Belen**Activity #** 9**Task:** A1RW05HIP**Sub-Task:** 60C5H9**Activity Description** In coordination with TRACT and COP targets, RPM Plus will work to strengthen 40 pharmacies at ARV clinical care sites and 20 district pharmacies. This will include scale up training on pharmaceutical management at all ART sites, scale-up implementation of SOPs at ARV pharmacies and district pharmacist, establish procedures for updates and reviewing SOPs at a national level, and improve the drug management information system at target ARV sites and district pharmacies including the implementation of the ARV dispensing tool.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Rwanda COP

Year 05

Activity Title To provide TA to the MoH for implementation of an integrated system of pharmaceutical management including the update of SOPs

**Project
Year 7 Q1**

Eighth district pharmacists have been hired to provide support to eight districts mentioned in the last quarterly report. In collaboration with CAMERWA, PTF, Task Force Integration, TRAC, TB and Malaria Programs, Policy planning and Human Capacity Development Units of MoH one month training has been conducted to ensure their effective orientation and readiness to carry out their future duties. In addition to the classroom training two days field visits have been organized in the eight districts to be fully supported by MSH/RPM Plus. These field visits provided them with a good opportunity to understand the organization and the functioning of the pharmaceutical system in the public sector as well as to collect all important information for the development of their respective action plan for 2007. They are expected to be in the field by January 2007. With other partners (INTRAHEALTH, EGPAF, FHI) field visits were organized in 7 districts (Kayanza, Gatsibo, Kamonyi, Muhanga, Nyanza, Huye and Nyamagabe) to discuss mechanisms for strengthening pharmaceutical activities in those districts.

During the last reporting period the dispensing tool has been installed into 2 new sites, Bungwe and Muhura. The use of the tool was also consolidated in 22 sites where it is already operational. DMIS specialist worked with the sites to respond to resolve their technical maintenance problems. By February 2007, the dispensing tool will be functional in 25 sites in total including TRAC clinic.

Delay in the rehabilitation of the district pharmacies. District authorities would like to contract directly with the architects, which is against USG policy.

Lack of commitment of some partners (TRAC) to be consistent to input data into the dispensing tool despite TA and support provided by MSH/RPM Plus. Unforeseen formatting of hard drives by partners' technicians everytime their data collectors experience problems with their computers.

Difficulty to ensure that health providers at the sites apply pharmacy SOPs.

Unproper use of the new PMTCT protocol by staff due to lack of follow up from TRAC. Some sites are still using the old PMTCT protocol.

Close follow up and monitoring of the rehabilitation process. Formal introduction of the pharmacists in their respective assigned districts. Then follow up and supervision.

Discuss with TRAC clinic's officials to resume the use of the dispensing tool. Reinstall the tool where it has been accidentally deleted and work with partners technicians to develop effective mechanisms for dealing with technical issues encountered by DT users. Establish the list of the sites where the dispensing tool is operational and with proven capacity to produce monthly reports.

Involve work with facility managers to ensure that pharmacy's SOPs are correctly used.

Work with TRAC to implement the new PMTCT protocol in the sites, organize training and ensure close follow up.

Workplan: Rwanda COP**Year** 05**Activity Title** To provide TA to the MoH for implementation of an integrated system of pharmaceutical management including the update of SOPs

99 out of 131 ART sites have reported using the updated tools (Monthly consumption and patient record) which has significantly improved the quality of data reported. The quantification was done based on the standardized model which has been implemented both at CAMERWA and in the sites. This resulted in the reduction of the number of technical problems recorded both at CAMERWA and sites.

In collaboration with TRAC, PTF field visits were organized in October 2006 to collect and verify the quality of data in all ART sites using the new PMTCT protocol. The outcome of this visit will be used in the next quantification of needs of drugs for PMTCT.

Last Updated: 01/10/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** Provide equipment and furnishing to 20 pharmacies at ART sites and district pharmacies**Activity Manager** Tarrafeta, Belen**Activity #** 10**Task:** A1RW05HIP**Sub-Task:** 60CXH9

Activity Description RPM Plus will scale up pharmacy capacity by improving basic infrastructures at 20 ART sites, with the following process: Assess pharmacy capacity for quality storage and good dispensing practices, through a rapid assessment tool developed; determine need for upgrades in infrastructure necessary to implement SOPs, and; prioritize and agree with authorities of each site the kind of intervention that MSH/RPM Plus will support, according to funding limitations. These might include, but not restricted to, procurement of shelves, filing cabinets, locked cupboards, and/or habilitation of space for confidential dispensing.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The upgrading of the district pharmacies is ongoing. One pharmacy, Ruhango has been fully rehabilitated. Rusizi, Karongi, Gicumbi, Musanze, Nyabihu and Rubavu have been 50-60% rehabilitated. Bugesera and Nyagatare are behind schedule because of some changes made to the original DAO. The process will be completed by January 2007. Equipments and materials for the 9 pharmacies have been ordered according to norms. We expect the pharmacists to be in the duty stations by the end of January 2007.	Changes in the original DAO. Willingness of district officials to directly contract with the architects which results in kind of lack of interest and commitment to follow up.	Organise regular and close follow up visits to concerned districts to meet January deadline. Ensure architects respect the terms and conditions of the original DAO. Use services of MCAP's Rehabilitation Officer for technical monitoring. Meet with Mayors to clarify their roles and responsibilities.		

Last Updated: 01/10/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Rwanda COP**Year** 05**Activity Title** Develop training materials and curricula and conduct training to improve pharmaceutical services at ART sites and District**Activity Manager** Tarrafeta, Belen**Activity #** 11**Task:** A1RW05HIP**Sub-Task:** 60CXM0**Activity Description** Training curriculums and materials need to be revised and updated according to experience, lessons learned, and new demands. During COP04 the priority in pharmaceutical management training has been to standardize procedures related to drug requisition, inventory control and record keeping on drug consumption. During COP05 RPM Plus will develop and provide other management modules related with good dispensing practices, rational drug use, with especial attention to pediatrics. National trainings will be conducted every quarter, with participation of the DOP and TRAC.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Rwanda COP

Year 05

Activity Title Develop training materials and curricula and conduct training to improve pharmaceutical services at ART sites and District

**Project
Year 7 Q1**

A workshop on development or adaptation of the tools of the Integrated Supportive Supervision have been conducted in collaboration with HIV/PBF, TRAC, PCIME, Reproductive Health, Integration Task Force, PTF, PNILT, PNILP, Districts and other partners such as FHI, EGPAF, CONCERN and ICAP. 14 participants attended the workshop. The plan and strategy for the next steps have been adopted. This includes finalization of the tools for Integrated Supportive Supervision (ISS), development of the ISS manual, organisation of a TOT in supervision followed by the training of district supervisors on ISS, then regular follow up. This activity was facilitated by two MSH consultants.

During the last reporting period the curriculum for Basic Pharmaceutical Management training has been reviewed and finalised by integrating lessons learned during the previous training activities. It will be soon submitted to MoH for approval. The curriculum for Advanced Pharmaceutical Management is under review and finalisation. It has been tested during the training of the district pharmacists. Once finalised, this curriculum will be used to upgrade the skills and knowledge of pharmacy staff who have been previously trained in basic curriculum or with significant experience in drug management. Eight district pharmacists have been trained in Advanced Pharmaceutical Management using the advanced curriculum in drug management on testing basis. Training follow up activities have been organised in ART sites in Nyanza, Huye and Nyamagabe districts where service providers have been

*Divergence of views among partners and stakeholders about the ISS approach and how it can be better implemented.
 *Perceived delay in the approval of the training curricula. Lack of consistency by the partners in the process of identifying appropriate people to be trained.
 *Rotation and mobility of trained staff. Lack of supportive supervision.

*Finalisation of tools of ISS. Develop ISS manual. Organise a TOT in ISS and test the tools. Use supervisors trained in TOT to train district supervisors. Conduct regular follow up.
 *Finalisation of training curricula and submission for approval. Implementation of the curricula.
 *Track the physical presence of trained staff and report back to the appropriate health officials. Organise Basic Pharmaceutical training for sites with new and untrained staff. Follow up.
 *Constitute a team to finalise the TOT curriculum. Review of draft of TOT curriculum for approval.

Workplan: Rwanda COP**Year** 05**Activity Title** Develop training materials and curricula and conduct training to improve pharmaceutical services at ART sites and District

trained in Basic Drug Management. The outcomes for this activity will be used for the ongoing for improvement of our training materials.

The developed curriculum is being finalised by the Consultant.

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** Conduct a situation analysis of the feasibility of establishing a sustainable and credible national drug authority (NDA).**Activity Manager** Tarrafeta, Belen**Activity #** 12**Task:** A1RW05HIP**Sub-Task:** 60AXFA

Activity Description According to the experience of MSH in other countries, to assist the Ministry of Health to move forward with the establishment of the NDA, the first activity that needs to be carried out for the establishment of a NDA will be to outline a conceptual framework describing the roles and responsibilities of a regulatory authority for pharmaceuticals (and, optionally, expanded for food, medical devices, and/or cosmetics) in a resource-limited country setting. This should include, but not be restricted to the following: Identifying, defining, prioritizing, and establishing an appropriate sustainable mix of technically sophisticated activities to support the risk-based regulatory systems, and; identifying the conditions and resources necessary to justify, develop, and sustain a system capable of providing a comprehensive service in a resource-limited environment. RPM Plus will work closely with the Direction of Pharmacy.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The process of establishing NDA is under way. The draft policy has been reviewed by the Ministry of Justice. Feedback and comments observations are being considered for final review. The final draft of Drug registration policy will be submitted to the Cabinet in January 2007 for approval. A stakeholders' meeting for consensus building on NDA and Drug registration policy will be organised in January 2007 by MSH/RPMPlus in collaboration with PTF.	Lengthy and time consuming process with uncertainty when it will be completed. Anticipated competing interest among stakeholders.	Assist MoH/PTF with the process leading to adoption of the policies related to NDA and Drug registration. Provide TA and support for the implementation of the agency.		

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Rwanda COP**Year** 05**Activity Title** Provide TA for the establishment of a Drug Registration System**Activity Manager** Tarrafeta, Belen**Activity #** 13**Task:** A1RW05HIP**Sub-Task:** 60A5HB

Activity Description RPM Plus plans the following activities as previous stages for the establishment of a NDA: assist the NDA in reviewing experience from other resource-limited countries to prioritize activities defined in scope, financial, technical, and human resources. MSH will also assist the NDA to explore the need, justification, and potential for employing human and technical resources from outside of the NDA; On the basis of activity 12, make recommendations on an appropriate scope of activities and developmental priorities for the NDA in Rwanda, including scope of product coverage (i.e., pharmaceuticals, food, medical devices, and/or cosmetics), and identify human, technical, and financial resources required; Define role of National Drug Authority in the MOH, including technical, human and financial resources, existing organizational structure, management, and information systems, legal and regulatory framework; Develop a comprehensive, prioritized, fully costed, multi-year, strategic plan to: Establish and implement an appropriate drug registration activity for protecting public health; Establish and implement a nationwide quality system program for all regulated areas including, as appropriate, testing, inspection, registration, and enforcement activities; Establish and implement policies and procedures for regulation of imported products as well as those manufactured domestically to help ensure availability of quality products and implementation of appropriate quality systems. Based on acceptance of the recommendations resulting from activity #3 and the strategic plan resulting from activity #5 by the Ministry of Health, develop: draft organizational structure and job descriptions for the NDA; draft policies and operational processes for a national system for drug registration and product quality assurance; draft legislation and regulations for instituting a national system of drug registration and product quality assurance.

**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
The process of establishing NDA is under way. The draft policy has been reviewed by the Ministry of Justice. Feedback and comments observations are being considered for final review. The final draft of Drug registration policy will be submitted to the Cabinet in January 2007 for approval. A stakeholders' meeting for consensus building on NDA and Drug registration policy will be organised in January 2007 by MSH/RPMPPlus in collaboration with PTF.	Delay in the passing of the Law on Drug Registration.	Once the Law is passed, MSH will provide MoH/PTF with a consultant to support the first stage of the registration process : Setting of the National Committee on Drug Registration. Training of committee members on SOPs on Drug registration. Monitoring and follow up.		

Last Updated: 01/04/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Sudan **Year** 05**Activity Title** 2. Support NMCP to finalize and disseminate the National Malaria Control Strategic Plan (NMSP)**Activity Manager** Azairwe, Robert **Activity #** 2 **Task:** A1SD05MAC **Sub-Task:** 60AXH2**Activity Description** This activity will include following up the finalization, submission and endorsement of the plan, printing the final plan, launching and orienting of State and County Health Officials on the strategic plan

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	The strategic plan has been finalized and submitted through the Minister of Health for endorsement by the Council of Ministers. Discussions on how to hasten the endorsement process have been held with both the Director General Preventive Medicine and the Malaria Control Program Manager.	Endorsing the strategic plan has taken a long time	Follow up with Director General of Preventive Medicine on Endorsement of the plan		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Sudan**Year** 05**Activity Title** Support NMCP to develop key malaria technical guidelines and training manuals**Activity Manager** Azairwe, Robert**Activity #** 3**Task:** A1SD05MAC**Sub-Task:** 60F4F3

Activity Description RPM Plus will support the NMCP and partners to put in place the key technical guidelines necessary for successful implementation of the new RBM strategic plan. This will include support to printing of the malaria case management guidelines, harmonizing ITN distribution guidelines, printing and orienting partners on the ITN guidelines, support to NMCP and partners to develop SOW for, and undertake the IRS feasibility study and development of the IVM guidelines. Support will also be provided in developing a national communication strategy for effective promotion of malaria control activities. This will include hiring consultants to work with the national resource persons. In addition to technical support, RPM Plus will co-fund the above activities in case funding already earmarked by other partners is not available or is not sufficient

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	NMCP was also supported to integrate the updated case management guidelines(for complicated malaria) into technical guidelines and to develop a national integrated vector management (IVM) strategy. WHO leads the process and so far a Vector Control Needs Assessment (VCNA) report and draft IVM strategic plan have been produced	NMCP is understaffed and it is sometimes difficult to coordinate several activities at the same time. National capacity for Integrated Vector Management (IVM) is grossly lacking	Support the process of developing the IVM strategy. Under the new arrangement an IRS feasibility study will not be undertaken. Support NMCP to embark on training of health workers.		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Sudan**Year** 05**Activity Title** Support MOH to strengthen the capacity of NMCP (human, equipment and infrastructure)**Activity Manager** Azairwe, Robert**Activity #** 4**Task:** A1SD05MAC**Sub-Task:** 60F4X4**Activity Description** RPM will support MOH to; develop a concept/proposal of the long term structure and functioning of NMCP; recruit national technical officers, acquire office space and basic equipment for NMCP.

NMCP will also be supported to establish a team of malaria trainers and supervisors, hold quarterly technical seminars, participate in technical meetings and undertake selected study tours.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Facilitated the NMCP participation at the East Africa Roll Back Malaria Network (EARN) annual malaria planning and review meeting and visiting the Tanzania pharmaceutical management system to share lessons and adopt best practices Received construction materials and construction will start early January 2007	A long procurement process	Follow up on construction of office structure and purchase of basic equipment		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** MAC-Field Support-Sudan**Year** 05**Activity Title** Support MOH and NMCP to strengthen coordination of RBM partners**Activity Manager** Azairwe, Robert**Activity #** 5**Task:** A1SD05MAC**Sub-Task:** 60F4N5**Activity Description** Under this activity, technical support will be provided to NMCP to map ongoing RBM projects indicating the partners, staffing levels, interventions provided and level of coverage, amount and source of funding, present and planned activities, etc for each project. An appropriate tool will be designed to collect the required information.

NMCP will also be supported to update the SOW and develop an activity plan for the malaria Technical Working Group, call for and hold monthly meetings for the group.

In addition, NMCP will be supported to hold biannual meetings with the state malaria coordinators as a forum for providing technical updates and reviewing progress of planned activities.

To enhance awareness on status of malaria control activities among partners and stakeholders, NMCP will be supported to publish a malaria newsletter, initially on an annual basis.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Support to roll out the new malaria treatment policy was provided in developing a roll out plan, support supervision checklists for all levels of health services and mapping of health partners for all 10 states. Supported the NMCP to refine the core malaria indicators in the M & E plan and update its KAP study tools to include standard RBM indicators	Some States do not yet have Malaria coordinators. In addition communication between the centre and States is still difficult. Lack of national M&E framework/system.	Call for a TWG meeting to discuss the draft SOW and develop an activity plan. States need to be supported to put in place malaria coordinators with clear SOW. Support NMCP to develop an M&E plan including a support supervision system		

Last Updated: 01/29/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Senegal**Year** 05**Activity Title** Technical Activity Coordination**Activity Manager** Briggs, Jane**Activity #** 1**Task:** A1SN05XXX**Sub-Task:** 97XXY1

Activity Description This activity includes technical activity coordination, workplan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators. This budget line covers the salary of the technical advisor rather than his level of effort being integrated into the individual activities.

**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
This quarter, RPM Plus discussed options for providing technical assistance to the national TB program in coordination with partners including FHI and USAID. Senegal is scheduled to change national policy for TB treatment to reduce the length of treatment and requires technical assistance in preparing for and implementing this change. The national TB program coordinator met with RPM Plus and approved organization of a workshop by RPM Plus focused on exploring pharmaceutical procurement options through the Global Drug Facility (workshop tentatively planned for April 2007). RPM Plus also participated in a dissemination meeting to discuss results of an external review of the national TB program. Recommendations generated from the review included improving the management of pharmaceutical products for the management of TB as well as developing a quality assurance system and a surveillance system to monitor HIV/TB co-infection and drug resistance.		This budget line is closed. RPM Plus will continue to explore providing technical assistance to the national TB program in collaboration with other partners by leveraging core funds.		

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Senegal**Year** 05**Activity Title** Dissemination of commodity survey on HIV, TB and malaria**Activity Manager** Briggs, Jane**Activity #** 2**Task:** A1SN05XXX**Sub-Task:** 60CXM2

Activity Description USAID requested RPM Plus, in collaboration with the Ministry of Health and other partners, to conduct an assessment survey in Senegal to review the logistics systems for the HIV, TB and malaria programs in order to strengthen and possibly integrate the current systems. RPM Plus developed and conducted an indicator-based assessment to evaluate the logistics systems (including aspects of quantification, distribution and supply) for HIV/AIDS, TB and malaria commodities (includes drugs and testing reagents) within the context of ISAARV, PNT and PLNP. Based on the results of the assessment, recommendations were drafted for improvement and possibly integration. To effectively apply the results and recommendations of the assessment, dissemination activities are planned, including a national workshop for stakeholders.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	This quarter, the Reproductive Health Division of the Ministry of Health invited RPM Plus to present the results of the commodity survey in preparation of a planned situational analysis of reproductive health products at the national level.		This budget line is closed. RPM Plus will finalize the survey report using core funds.		

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Senegal**Year** 05**Activity Title** TA to PNLP for procurement and quantification of antimalarials (particularly ACTs)**Activity Manager** Briggs, Jane**Activity #** 5**Task:** A1SN05XXX**Sub-Task:** 60C2H5

Activity Description RPM Plus will provide input and TA where necessary for procurement and quantification of antimalarials, particularly with regards to the newly introduced ACTs but also SP for IPTp. Technical assistance may also be provided to the PNLP to orient private pharmacists and practitioners on the new ACT treatment protocols. If necessary, RPM Plus will assist the PLNP and PNA to phase out the older antimalarials that are no longer consistent with the national policy.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	<p>This quarter, RPM Plus completed an antimalarial assessment using Global Fund bottleneck activity funding in collaboration with the national malaria program (PNLP). RPM Plus developed data collection tools and circulated drafts for review by partners before implementation. Data collection occurred over a ten-day period (Oct 16-26th, 2006). Data was analyzed and a workshop was held to share recommendations with stakeholders. As follow up to the results and recommendations generated from the assessment, RPM Plus met with stakeholders including the head of procurement and stock management in country responsible for pharmacovigilance and quality control. Discussion included installing a committee to follow-up on recommendations generated by the assessment. In addition to encouraging committee development, RPM Plus initiated contacts and discussed with partners from the Ministry of Health possible collaboration on the development of a district level drug management reporting tool to be used for monthly supervision.</p>		<p>This budget line is closed. Continuing technical support to the national malaria program will be providing through core funding until the outcome of the PMI decisions to determine further malaria specific work. Continuing activities related to the bottleneck Global Fund assessment will be funded with Global Fund Technical Assistance funds.</p>		

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Senegal**Year** 05**Activity Title** Complete the training of private counter assistants**Activity Manager** Briggs, Jane**Activity #** 7**Task:** A1SN05XXX**Sub-Task:** 60CXM7**Activity Description** This first phase of the activity will train the sales assistants from private pharmacies in the USAID regions. Then RPM Plus will work with different sections of the MoH (PNA, DPL and regional and district supervisors) and the order and syndicate to develop mechanisms to follow up and conduct supervision in the pharmacies after the training to monitor the improvement in drug use. Core SO3 funds will also be used to support this activity.

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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**Project
Year 7 Q1**

This quarter, the draft of the final report for all 11 of the private sector sales assistant trainings was reviewed by RPM Plus and comments sent to the Senegal team for incorporation into the final version.

This budget line is closed. Continued activities will be covered using core child survival (SO3) funding. The final report summarizing results from the training of private sector sales assistants will be completed and disseminated. A supervision mechanism will be developed with partners and will include standardized monitoring tools.

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Senegal**Year** 05**Activity Title** Community ARI**Activity Manager** Briggs, Jane**Activity #** 8**Task:** A1SNXXX**Sub-Task:** XXXXXX**Activity Description** Community case management of pneumonia and malaria is a priority of the MoH and the USAID Mission. RPM Plus will provide technical assistance in the implementation of this as necessary and appropriate for example in training ASCs, in supervision and follow-up**Project
Year 7 Q1**

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
RPM Plus continued to be available for technical input into the development of a supervision mechanism to monitor and evaluate the knowledge and practices gained by community health workers during trainings.		This budget line is closed. As needed, RPM Plus will continue to support the implementation and refinement of a supervision mechanism for community ARI through core child survival (SO3) funds.		

Last Updated: 01/22/2007

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tanzania (PMI) **Year** 06**Activity Title** Technical Activity Coordination and Monitoring**Activity Manager** Rutta, Edmund **Activity #** 1 **Task:** A1TZ06PMI **Sub-Task:** 97XXXY1**Activity Description** This activity includes technical activity coordination, workplan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators.

Implementation of the listed workplan activities will be through the MSH/RPM Plus office in Tanzania. RPM Plus is hiring a Senior Program Associate in Tanzania who will work closely and coordinate with the President's Malaria Initiative team NMCP, TFDA, and other partners at the national level, and stakeholders at the district level including councils, district medical officers, ward and village executive officers in Ruvuma and Morogoro regions. RPM Plus will coordinate activities with Ifakara Health Research and Development Center (IHRDC). The RPM Plus Tanzania team will be supported by the regional technical malaria team based in Nairobi, and the RPM Plus malaria team based in Arlington, Virginia.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	In support of the ACT Policy Implementation, supported and facilitated training of 139 pharmaceutical personnel at district level for 11 regions. As a member of the ACT promotion working group, participated in the preparation of ACT national launching event. Attended the PMI coordination meeting.	None	Participate in the National ACT launch scheduled for 15th January 2007		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tanzania (PMI)**Year** 06**Activity Title** Private sector distribution of subsidized ACT through the Accredited Drug Dispensing Outlet (ADDO) program**Activity Manager** Rutta, Edmund**Activity #** 2**Task:** A1TZ06PMI**Sub-Task:** 60C4H2**Activity Description** It is planned that under current USAID Tanzania funding for PMI activities, \$ 300,000 worth of ACT treatment (Artemether-Lumefantrine) will be procured from Novartis for ADDOs. RPM Plus will support the implementation of this strategy through the following sub-activities:

Sub-activities planned:

2.1. Quantification of ACT consumption and morbidity data in Ruvuma and Morogoro regions to be used in quantification of ACTs for ADDOs. Share the estimated quantities with PMI team and Private whole seller for procurement purpose.

2.2. Assist MOHSW/NMCP, donors and other stakeholders to develop a model/mechanism for determining pricing for ACTs as a basis for pricing policy decisions within the private sector.

2.3. Develop distribution plan and map out all distributors for ACTs for ADDO. Conduct meetings with selected ACTs distributors for Ruvuma and Morogoro region to discuss the, distribution, storage, record keeping, pricing and incentives.

2.4. Develop and implement commodity tracking for ACTs consumption within the overall ADDO monitoring system. In particular, monitoring for leakage and discouraging the sale of subsidized products intended for rural ADDOs at urban pharmacies or through other illegal channels.

2.4. Strengthen the ADDOs' capacities to implement the new malaria policy related to artemether-lumefantrine storage, inventory control, and reporting [trainings and orientation of owners, dispensers and inspectors on the new ACT policy].

2.5. Strengthen the ADDO supportive supervision and monitoring system to track artemether-lumefantrine distribution, quality, distributor's performance and rational use in collaboration with NMCP, TFDA, and district authorities.

2.6. Implement NMCP communication strategy to promote the access of Artemether-lumefantrine through ADDOs in Ruvuma and Morogoro regions

Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
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Workplan: Tanzania (PMI)**Year** 06**Activity Title** Private sector distribution of subsidized ACT through the Accredited Drug Dispensing Outlet (ADDO) program**Project
Year 7 Q1**

Finalized the quantification assessment report to determine ACT needs for approximately 400 ADDOs. Identified a potential pharmaceutical wholesaler/distributor for distribution of ACT through ADDOs. Developed a pricing mechanism and determined the price of ACT through ADDOs. Developed ACT distribution plan for ADDOs.

Official statement on rescheduling of ACT from Prescription only medicine to over the counter medicine not been released. Norvatis has not yet agreed repackage ACT for ADDOs at no cost.

- Finalize discussions for package design for ACTs which will be distributed through ADDO.
- Start social marketing activities of ACT
- Request PMI to start the process of procurement of ACT
- Develop a monitoring system to track stock and consumption of subsidized ACTs
- Train dispensers on ACT policy implementation.
- Follow up with TFDA on rescheduling of ACT from prescription only medicine to Over the Counter and exemption of 2% CIF importation fee.

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tanzania (PMI)**Year** 06**Activity Title** Provide technical assistance in support of ACT policy implementation to the Medical Stores Department (MSD).**Activity Manager** Citysoft Admin**Activity #** 3**Task:** A1TZ06PMI**Sub-Task:** 60A2H3**Activity Description** RPM Plus in conjunction with the NMCP will support MSD by providing technical assistance to enable the efficient quantification and tracking of ACTs.

Sub-activities include:

3.1. Review of MSD core operation functions and previous interventions done by other agencies to strengthen MSD capacity to ensure uninterrupted supply of ACTs to public health facilities. Based on the identified gaps, develop specific strategies for technical support.

3.2. Develop supportive supervision system and conduct supervision to the facilities that will help MSD to get accurate feedback information from facilities on the ACTs consumptions in the first two cycles of distribution.

3.3. Assess MSD database/DMIS capacity in capturing all information regarding ACTs consumption and distribution. Work with MSD to analyze consumption patterns from the collected information and share the information with NMCP and PSU for better quantification.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	RPM Plus participated in a joint meeting with MSD, NMCP, PSU on ACT distribution plan and inventory management. Integrated logistics management form was adapted and modified to capture more consumption data related to ACT distribution and use at facility level	None	Conduct a joint meeting with NMCP, PSU, and MSD and come up with a plan to track consumption of ACT in the public sector.		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Tanzania (PMI)**Year** 06**Activity Title** Support to TFDA to undertake adverse drug reaction (ADR) monitoring and also to establish systems to detect unintentional exposure**Activity Manager** Citysoft Admin**Activity #** 4**Task:** A1TZ06PMI**Sub-Task:** 60EXH4

Activity Description The TFDA pharmacovigilance system will be used to monitor the safety profile of the drug. However; the big challenge with the existing ADR monitoring system is that only a few reports are being received from the zonal centers and health facilities. In order to revitalize the ADR monitoring system, RPM Plus will work with TFDA on the following:
Conduct two days consultative PV meeting to share experiences and lessons learned from ADR monitoring of antimalarials in pregnant women in Ghana and Mozambique. Identify gaps in ADR monitoring system of ACTs in Tanzania.

4.2. Develop and discuss PV implementation plan with NMCP, TFDA and CDC/IHRDC.

4.3. Develop strategies to improve surveillance methods and ADR reporting structure at the district level where ADR reports are expected to be generated.

4.4. Develop guidelines and SOPs for distribution and collection of ADR reporting forms. Provide training at district level to raise ADR awareness as drug safety issue. Use of SOPs for distribution and collection ADR reporting system.

4.5. Monitoring and evaluation of pilots districts PV-intervention.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	TFDA management approved the proposed work plan for PV implementation. A PV working group has been formed and started working on the planned PV activities. Two pilot districts (Ulanga and Kilombero) have been selected.	None	Review the available training materials at TFDA and CDC/IHRDC Develop guidelines and SOPs for distribution and collection of ADR Sensitize of Regional and District officials and ADDOs owners in the selected districts.		

Last Updated: 12/18/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Uganda (PMI) **Year** 06**Activity Title** Technical Activity Coordination**Activity Manager** Kidde, Saul **Activity #** 1 **Task:** A1UG06PMI **Sub-Task:** 97XXY1**Activity Description** In support of this technical objective, RPM Plus will provide technical assistance in activity coordination, work plan development, budget monitoring, progress monitoring and reporting. RPM plus will also participate in meetings at different levels and communicate with partners and collaborators.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Developed FY 2007 draft country operational plan for RPM Plus. <ul style="list-style-type: none">• Attended the National Health assembly, the Malaria Partners meeting to plan for National malaria activities for FY 2007 and the select committee meeting to discuss report for the restructuring of National Medical Stores	None			

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Uganda (PMI)**Year** 06**Activity Title** Provide financial and technical support to National Medical Stores (NMS) for storage and distribution of ACTs procured under the PM**Activity Manager** Kidde, Saul**Activity #** 3**Task:** A1UG06PMI**Sub-Task:** 60CXHA

Activity Description Under PMI/Uganda funding, the NMS received, and is storing 261,200 USAID/PMI treatment doses. These will be distributed to Northern Uganda as part of the "Jumpstart" activity. The associated cost of handling for storage and distributing these doses by NMS - \$70,000 US dollars will be paid by RPM Plus. In addition, to ensure the immediate availability of coartem to the rest of the population served by government Health facilities, RPM Plus will fund extra labor costs for preparing orders to supply buffer stocks to the districts and contract a firm to transport Coartem® to Health sub-district level at a total cost of \$ 30,000. RPM Plus will also work with NMS and NMCP to put in place systems and procedures for the coordination of the monitoring of the distribution and availability of ACTs for Health facilities.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Financed the distribution of 34,860 doses of Community Coartem for the 3 conflict districts of the North	None			

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1**Workplan:** Uganda (PMI)**Year** 06**Activity Title** Support the establishment and coordination of a National Malaria Commodities and Medicines Supply Chain Committee**Activity Manager** Kidde, Saul**Activity #** 4**Task:** A1UG06PMI**Sub-Task:** 60C4HB**Activity Description** RPM Plus will work with the NMCP to establish a supply chain committee that will be charged with reinforcing 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. The committee will develop a two year operational plan that will guide implementation of activities to ensure availability and rational use of anti-malarials medicines, especially ACTs.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Held 3 meetings for the committee. Quantified Coartem quantities for the Nation for FY 2007. Initiated the rescheduling of ACTs to OTC medicines with the National drug authority. Designed a draft for tracking antimalarial use for Health facilities and districts. Facilitated the receipt of Coartem in the Private not for Profit sector. Developed a draft two year operational plan for Malaria medicines procurement, storage and distribution.	None			

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Uganda (PMI)**Year** 06**Activity Title** Work with NMCP to develop a plan of action to facilitate distribution, availability, use and reporting of ACTs including adapting an**Activity Manager** Kidde, Saul**Activity #** 5**Task:** A1UG06PMI**Sub-Task:** 60CXHC

Activity Description With the malaria supply chain committee and in accordance with the ACT roll-out strategy RPM Plus will support the development of a plan for distributing reporting and monitoring of ACTs by ensuring that there is establishment of:

- o national level capacity and plans for receipt, storage and distribution of ACTs
- o district health facility capacity and plans for receipt and storage of ACTs
- o plans for determination and provision of support to district health facilities to enable the proper quantification of ACTs and thus ensure adequate supply and availability of ACTs
- o a system for the determination, procurement and district distribution of other antimalarials.
- o mechanisms for maintaining accurate inventory records and tracking of Artemether-Lumefantrine and other antimalarial medicines in use within the public sector
- o strategies for covering storage and distribution costs and minimizing leakage to ensure malaria medicines availability at health facilities
- o support the existing commodity monitoring and evaluation system and strengthen key levels of the supply system in support of malaria control by adapting RPM Plus monitoring tools that have been tested and seen to work in other countries.

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

**Project
Year 7 Q1**

Attended the joint Review mission and ensured the adoption of the plan for the National medical Stores to out source part of its distribution services. Attended 4 national logistics committee meetings for the phase in of community Coartem

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: Uganda (PMI)**Year** 06**Activity Title** Work with NMCP, NMS and NDA to design a strategy for phasing out Chloroquine as first line for malaria case management and**Activity Manager** Kidde, Saul**Activity #** 6**Task:** A1UG06PMI**Sub-Task:** 60E3HD**Activity Description** RPM Plus will support the development of a strategic plan of action by NMS, NMCP and NDA. The plan will adapt a combination of strategies that have worked well in other countries and locally.

**Project
Year 7 Q1**

Activity Progress**Barriers to Progress****Next Steps****Products Planned****Progress on Products**

Held a two day workshop for the phase out of Chloroquine and other mono-therapies. Worked with NDA to develop a plan of action for implementation of the phase out and a draft report for the workshop.

None

Last Updated: 12/15/2006

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 7 AND Reporting Quarter = Q1

Workplan: MAC-Field Support-Democratic Repu Year 05**Activity Title** Documentation of ACT roll out and use in 2 provinces**Activity Manager** Kabuya-Mutshipayi, Willy**Activity #** 3**Task:** A1ZR05MAC**Sub-Task:** 60E3H3**Activity Description** RPM Plus will assist NMCP to collect and analyze ACT roll out. Thus data will be utilized in decision-making.

	Activity Progress	Barriers to Progress	Next Steps	Products Planned	Progress on Products
Project Year 7 Q1	Supported PNLP to monitor activities in the 2 planned provinces, Bas-Congo (4 health zones) and Kasai Occidental (3 health zones)		TA to address bottlenecks in DRC activities related to ACT roll out, in collaboration with CDC and WHO		

Last Updated: 12/18/2006
