

Activity and Product Status Report

**Project Year 8,
Quarter 3
April – June,
2008**

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*

August 2008

**Rational Pharmaceutical Management Plus Program
Activity and Product Status Report**
April – June, 2008

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



MANAGEMENT SCIENCES *for* **HEALTH**

RPM Plus | *Rational Pharmaceutical
Management Plus*

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About RPM Plus

RPM Plus works in more than 20 developing and transitional countries to provide technical assistance to strengthen pharmaceutical and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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ACRONYMS AND ABBREVIATIONS

| | |
|------------|-------------------------------------------------------------------------------------------------------------------|
| AB | Africa Bureau |
| ACCESS | Access to Clinical and Community Maternal, Neonatal and Women's Health Services [program—USAID-funded consortium] |
| ACT | artemisinin-based combination therapy |
| ADR | adverse drug reaction |
| 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] |
| APMR | ART Patient Monitoring and Reporting System |
| ARCH | Applied Research for Child Health [Project] |
| ART | antiretroviral therapy |
| ARV | antiretroviral |
| BASICS | Basic Support for Institutionalizing Child Survival [Project] |
| BASICS II | Basic Support for Institutionalizing Child Survival II [Project] |
| BGH | USAID Bureau of Global Health |
| CA | cooperating agencies |
| CAMEWA | Centrale d'Achat des Médicaments Essentiels du Rwanda |
| CCM | country coordinating mechanisms |
| 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 |
| COP | country operational program |
| CPDS | Coordinated Procurement and Distribution System |
| 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 [United Kingdom] |
| DMCI | Drug Management for Childhood Illness |
| DMIS | Drug Management Information System |
| DOMC | Division of Malaria Control [Kenya] |
| DOTS | internationally recommended strategy for tuberculosis control |
| DQI | Drug Quality and Information |
| DR | Dominican Republic |
| DRC | Democratic Republic of the Congo |
| DTC | Drug and Therapeutics Committee |
| ECSA | East, Central, and Southern Africa |
| EandE | Europe and Eurasia [Bureau, USAID] |
| FDC | fixed-dose combination |
| FHI | Family Health International |
| FHI/IMPACT | FHI/Implementing AIDS Prevention and Care [Project] |
| FY | fiscal year |
| GDF | Global Drug Facility |

RPM Plus Activities and Products Status Report

| | |
|--------|-------------------------------------------------------------------------------------------|
| GFATM | Global Fund for AIDS, Tuberculosis and Malaria |
| GTZ | Deutsche Gesellschaft für Technische Zusammenarbeit (German Technical Cooperation Agency) |
| IC | infection control |
| ICAT | Infection Control Assessment Tool |
| 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 |
| ITNs | insecticide-treated nets |
| IUATLD | International Union Against Tuberculosis and Lung Disease |
| JSI | John Snow, Incorporated |
| KEMSA | Kenya Medical Supplies Agency |
| KfW | German Development Bank (German acronym) |
| LAC | Latin America and the Caribbean |
| LFA | local funding agency |
| MandE | monitoring and evaluation |
| MAC | Malaria Action Coalition |
| MCH | maternal and child health |
| MEDS | Missions Essential Drugs Store |
| MNH | Maternal and Neonatal Health [Project] |
| MoH | Ministry of Health |
| MSD | Medicines Stores Department |
| MSF | Médecins Sans Frontières |
| MSH | Management Sciences for Health |
| MTP | monitoring, training, planning (methodology) |
| NACC | National Antibiotic Coordinating Committee [Nepal] |
| NFHP | National Family Health Program |
| NGO | nongovernmental organization |
| NIS | Newly Independent States |
| NMCC | National Malaria Control Center |
| NMCP | National Malaria Control Program |
| NMS | National Medical Stores |
| NTP | national tuberculosis 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 |
| POPPHI | Prevention of Postpartum Hemorrhage Initiative |
| PPH | postpartum hemorrhage |
| PRDU | Promoting Rational Drug Use |
| PY | Project Year |
| QA | quality assurance |
| RBM | Roll Back Malaria |
| RDTs | rapid diagnostic tests |
| REDSO | Regional Economic Development Support Office [USAID] |

RPM Plus Activities and Products Status Report

| | |
|-------------|----------------------------------------------------------------------------------------------------|
| RMU | rational medicine use |
| RPM | Rational Pharmaceutical Management [Project] |
| RPM Plus | Rational Pharmaceutical Management Plus [Program] |
| SCMS | Supply Chain Management System |
| SEAM | Strategies for Enhancing Access to Medicines [Program] |
| SO | Strategic Objective [USAID] |
| SOPs | standard operational procedures |
| SSO | Strategic Support Objective |
| STGs | standard treatment guidelines |
| STI | sexually transmitted infection |
| TA | technical assistance |
| TB | tuberculosis |
| TBCTA | USAID TB Coalition for Technical Assistance |
| TOR | terms of reference |
| TOT | Training-of-Trainers |
| TRAC | Treatment and Research AIDS Center |
| 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 |
| USD | U.S. dollar |
| USG | U.S. Government |
| USP | United States Pharmacopeia |
| VCT | Voluntary HIV/AIDS Counseling and Testing [USAID initiative] |
| WHO | World Health Organization |
| WPRO | Regional Office for the Western Pacific [WHO] |

GLOBAL PROGRAMS

SO2: REPRODUCTIVE HEALTH

Overview

Rational Pharmaceutical Management (RPM) Plus continues to provide technical assistance to the Prevention of Postpartum Hemorrhage Initiative (POPPHI) in drug and supply management issues that might hinder active management of the third stage of labor (AMTSL) to prevent postpartum hemorrhage. POPPHI is a consortium of partners comprised of the Program for Appropriate Technology in Health, RTI International, EngenderHealth, the International Confederation of Midwives, and the International Federation of Gynecology and Obstetricians. 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 support interventions through the expanded use of 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 West Africa, namely Ghana, Senegal, Burkina Faso, Benin, and Mali, have introduced and expanded the use of AMTSL. Others have recently begun expanding use with support from earlier USAID-funded activities. Major hurdles related to the range of medicines, their availability, and routes of administration exist to prevent AMTSL from becoming a universally available intervention. RPM Plus activities under U.S. Agency for International Development (USAID)/G/PHN SO2 focus on three main technical objectives—

1. Through strategic partnerships with and technical leadership to USAID and USAID-supported cooperating agencies (CAs) working in maternal health, improve maternal health program planning and service delivery with respect to medicine and commodity management issues
2. Enhance the capacity of government and nongovernmental organizations (NGOs) to manage drugs and supplies for key maternal health services
3. Improve the capacity and awareness of global maternal health initiatives and partners in addressing maternal health pharmaceutical management issues

Major Activities This Quarter

This quarter all budget lines and RPM Plus maternal health activities were closed and completed. Continued maternal health activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports

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 (FY 03)—

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 SO3, 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 This Quarter

This quarter, the District Pharmaceutical Management for Childhood Illness tool (adapted from the Drug Management for Childhood Illness tool) was completed and is ready for dissemination.

In addition, all budget lines and RPM Plus child survival activities were closed and completed. Continued child health activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports.

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

Major Activities This Quarter

In June 2008, SPS, in collaboration with WHO/WPRO, the GDF, and the Green Light Committee, facilitated two country-based MDR-TB follow-on drug management workshops in the Philippines and Mongolia. These workshops were follow-on from a RPM Plus course on “Pharmaceutical Management of Multi-Drug Resistant Tuberculosis” conducted with GDF and WHO/WPRO in November 2007. 4 males and 8 females participated in the follow-on workshop in the Philippines and 12 females attended the one in Mongolia. Under the RDMA funding, three other country-based follow-on works were scheduled, in Cambodia, Vietnam, and China.

REGIONAL PROGRAMS

Asia and the Near East Regional Program (RDMA)

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 Management Sciences for Health RPM Plus Program. In 2006, new 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 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.

RPM Plus Technical Objectives and Rationale

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 nongovernmental organization (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

Malaria

RPM Plus received a request from the Lao PDR Center for Malariology, Parasitology, and Entomology (CMPE), the Global Fund (GF) principle recipient (PR) office, and WHO to provide technical assistance in the management of ACTs and other commodities for malaria. During discussions with the National Malaria Program (CMPE) and the Office of the Principal Recipient of the Global Fund RPM Plus helped identify three priority areas--quantification, inventory management and reporting systems. RPM Plus provided immediate assistance with quantification of anti-malarial commodities during a visit in April. Data collection for a rapid assessment of inventory management and reporting systems focusing on the district and village levels began at the end of June 2008. Based on the results of the rapid assessment, RPM Plus will provide technical assistance (TA) to address the GF conditions precedent for 2nd and 3rd disbursement of Round 7 (i.e. related to storage, inventory management and reporting).

In the fall of 2007, RPM Plus received a request from the Thai MOH/Bureau of Vector Borne Diseases and KI/Asia/BAAM to provide TA to assess Thai procurement and distribution practices and plans under GFATM Round 7. This quarter, RPM Plus traveled to Thailand to discuss a timeline, finalize plans, and begin data collection for this activity.

As a follow-up to the November 2007 “Regional Training Course on Pharmaceutical Management and Quantification for Malaria” in Hanoi, Vietnam, RPM Plus, in conjunction with ACTMalaria, began developing a web-based forum—including a webpage giving an overview of general pharmaceutical management of malaria with links to user manuals and tools—to facilitate discussions among course participants on the progress of country improvement plans to address pharmaceutical management and quantification of antimalarials. RPM Plus technical staff will moderate discussions to elicit experience sharing and address common challenges.

RPM Plus participated in the bi-annual Mekong Malaria Partners Meeting in April 2008 in Bangkok, Thailand. The purpose of the meeting was to facilitate partner discussion, review activities and present workplans. As with previous meetings, partners focus on identifying complementary areas for collaboration in the region.

Tuberculosis

In March 2008, RPM Plus presented to the Chinese National Center for Tuberculosis Control and Prevention (NCTB) an SOP manual for managing second line TB medicines. The manual was finalized in late June and will be presented to NCTB counterparts during a visit in July. The NCTB plans to merge all or part of the SOP, focusing on the quantification tool, with the first line manual and integrated it into their existing training and skills dissemination program.

RPM Plus supports WHO's Stop TB Initiative by providing technical assistance through various global, regional and national activities to strengthen TB pharmaceutical management capacity of TB control programs. One activity is to assist the Global TB Drug Facility (GDF) at Stop TB in conducting rapid assessments of the TB pharmaceutical supply system assessing program management, financial management and pharmaceutical management. In May, RPM Plus conducted assessments for both first and second line TB medicines in Mongolia.

In November 2007, RPM Plus facilitated a course on "Pharmaceutical Management of Multi-Drug Resistant Tuberculosis" in collaboration with WHO/WPRO, the GDF, and the Green Light Committee (GLC). Between May and July 2008, these partners conducted three out of five joint country-based follow-up workshops in Mongolia, Vietnam, and the Philippines with two more (China and Cambodia) to be completed by July 2008. Objectives of this follow up TA were to:

- evaluate progress with participants in implementing improvement plans
- provide customized assistance in refining country improvement plans and addressing challenges to progress

HIV/AIDS

RPM Plus visited Laos in April to evaluate the pharmaceutical management systems for ordering and managing HIV test kits at ART sites and VCT centers. RPM Plus debriefed the Center for HIV/AIDS & Sexually Transmitted Infections (CHAS) on the findings of the site evaluations and recommendations for immediate and mid-term systems strengthening to facilitate the transition of management of ARVs and other commodities from MSF to the MOH/CHAS. One of activities agreed upon during those discussions, was for RPM Plus to prepare a standard operating procedures (SOP) manual for processing resupply requests from ART sites. During this quarter, RPM Plus also began development of SOPs and tools for key pharmaceutical management functions including quantification, medication counseling practices, ordering and receiving and distribution. In the next quarter, RPM Plus will continue to assist in developing implementation plans at the site level including training site staff in preparation for the handover of ART management

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 multidrug 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 This Quarter

RPM Plus was a member of the organizing committee for a videoconference sponsored by LinksMedia and the Inter-American Development Bank. The purpose of the videoconference is to present SAIDI results to different Latin American countries interested in a similar approach to combating antimicrobial resistance. The videoconference will be held on July 10, 2008 (Q4). RPM Plus met with partners, developed the videoconference agenda, approved the invite list, and reviewed all technical presentations. RPM Plus also submitted documentation to LinksMedia for the SAIDI report summarizing all activities and achievements to date.

In Peru, RPM Plus continued to support SAIDI activities described in the logical framework. Specifically:

- In April/May 2008, RPM Plus and APUA carried out a problem-based training for prescribers to promote rational drug use and the adoption of the standard treatment guidelines (STG) for respiratory infections in children under 5 developed through SAIDI.
- Local hospitals finalized their infection control plans, received the hand-washing supplies procured by RPM Plus, and continue implementing infection control activities.
- The DISA Callao DIC was officially launched in April 2008. RPM Plus hired a consultant to work with the DIC to train new staff and develop promotional materials, a communications plan, and DIC standard operating procedures (SOP). In addition, RPM Plus provided reference books and two journal subscriptions to DIC Callao.
- The DISA Callao warehouse was certified in Good Storage Practices during this quarter. The Good Storage Practices guidelines were distributed to other DISAs in Peru and RPM Plus will be available for technical support to implement (as needed). RPM Plus also provided training and technical assistance to DISA Callao in procurement, helping the DISA quantify needs and procure medicines for the upcoming year.
- The SOPs developed for the supply of 2nd line TB medicines were approved by the National TB program and will be distributed throughout the country.
- The SAIDI Peru P4 working group continues to support communications activities. ProVida finalized the training materials on rational use of antibiotics for community health workers in Peru. RPM Plus contracted a consultant to train private Callao pharmacy owners in social responsibility.

RPM Plus visited Paraguay in May 2008. RPM Plus and the *Univeridad Nacional de Asunción* DIC developed materials and carried out a set of 3 trainings in Good Dispensing Practices for facility-level pharmacists and drug managers in five health regions. These workshops reached over 80 dispensers directly and provided materials and training to disseminate information on rational use to other prescribers and dispensers at participants' work sites. PROMESA developed a website for the DIC and distributed communication packages to prescribers; their contract was finalized in June 2008.

RPM Plus presented the results of an evaluation of the individualized TB Kit system to the National TB Program and representatives from five health regions in a workshop. Participants

shared their experiences and developed solutions to the challenges preventing full implementation of the Kits. RPM Plus will procure 3000 more boxes and provide technical assistance to the National TB Program to develop SOPs for Kit implementation in order to support the extension of the Kit strategy at the national level.

In Guatemala, ProConDe continued to follow up on the implementation of improvement plans in the ICAT pilot hospitals. All hospitals were visited at least once. The consultants have continued to work with the MoH authorities of progress and monitor hospital progress. The implementation workshop will take place in July 2008. RPM Plus has also coordinated with the URC *Calidad en Salud* program to adapt an infection control module for use in their activities with maternal-child health clinics.

COUNTRY PROGRAMS

Albania

Overview

Management Sciences for Health, Rational Pharmaceutical Management Plus (RPM Plus) Program activities in Albania started in 2001 with a reconnaissance visit to design a program of activities. The areas of work proposed included: (1) improving provision of drugs used in hospitals; (2) creating and implementing Standard Treatment Guidelines for general practitioners; and (3) improving the system of drug subsidies for ambulatory patients. After initial appraisal with USAID, RPM Plus decided to concentrate on improvement of drug use for general practitioners. It was decided that a Drug of Choice (DoC) list should be developed to improve prescribing practice. The DoC list should complement Clinical Practice Guidelines (CPG) being developed with USAID funding by the PHR Plus program of Apt Associates Inc, but there was limited interest at the time [2001-2005] in drug procurement and treatment guidelines, and uncertainty whether the timing was right to continue until more progress had been made in primary health care and related health financing reforms. There was also confusion on how the DoC list would fit together with the CPG prepared by PHR Plus. RPM Plus revisited Albania in 2006 to assess how remaining funds could best be spent to improve pharmaceutical management in Albania. Building on USAID funded work and partners, it appeared most effective to support the development of a national appraisal system that will adapt existing Clinical Practice Guidelines for the use at national level. With a change in leadership at the MOH and with the World Bank also providing funding for the development of an appraisal system, USAID suggested to shift the emphasis of RPM Plus activities.

Major Activities This Quarter

The development of training materials for Continuing Medical Education of nurses working at Primary Health Care level in the five prefectures has been completed and translated into Albanian language, while the review of training sessions prepared by PRO Shëndetit was finalized in early May.

Initial training sessions was conducted in late May in Saranda, Albania, where RPM Plus consultant presented the following sessions:

- 1- Nursing management of diabetes
- 2-Nursing management of Hypertension
- 3-Respiratory infections in children and adults
- 4-Family planning Contraceptive counseling Sexual Health

Following the initial training session RPM Plus participated in the planning for the next training of trainers that will be conducted in Shkodra, Albania.

RPM Plus Activities and Products Status Report

Since most of the activities planned have been completed, RPM Plus discussed with URC-PROShëndetit options for additional activities to support rational drug use and the quality of PHC services.

Next steps:

Further activities to improve rational drug use and the quality of services will be concretised and started.

Training activities will continue according to the schedule set by PRO Shëndeti

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 the Global Fund grant obtained by Angola to support the national malaria control program and procure 1.1 million ACTs. The treatments were distributed in 9 of the 18 provinces in Angola but preparations to appropriately receive, distribute, manage and use the ACTs at the health facility level and in the distribution system were not completed. In light of this, RPM Plus was solicited to improve the ACT implementation and recommended the integration of ACT management into the Essential Drug Program (EDP) system with the subsequent adaptation of their procedures and tools to train the health agents. RPM Plus also developed a draft ACT distribution plan and proposed strategic approaches to finalize the plan with PMI partners, including a coordinated procurement and distribution system, the consolidation of the pharmaceutical information system and support to Angomedica.

Major Activities This Quarter

- The Pharmaceutical Management Training Manual and Supervision Checklist were revised and finalized with the feedback and comments received from MoH and partner NGOs during and after the joint review organized by MSH/SPS consultant Dr Gustavo Valles do Bastos during last quarter.
- Plan the training of trainers using the revised materials with the NMCP, DNME, PMI country team and PMI awarded NGOs. The interactions were facilitated by the PMI Angola team and it was agreed to organize the training in Malange with Consaude, with representatives from Zaire, Huambo, Kwanza Norte and Kwanza Sul.
- Conduct the training of trainers coming from the 5 provinces, totalizing about 40 participants trained by the DNME and MSH/SPS in partnership with MENTOR, World Vision, Africare and Consaude.
- Supervision check list was revised with the NGO partners after testing operated in two provinces. The agreement is now to have a short version for key information to be periodically monitored and a long version including all elements that would be required for an extensive supervision
- SPS/MSH supported the MOH (NMCP, DNME and GF/MOH unit) and partners such as WHO, UNICEF and UNDP in reviewing the PSM plan of the GF malaria grant round 7, provided responses to the GF and LFA questions formulated during the initial PSM plan review.
- Staff issues: the long term consultant recruited to represent and implement SPS/PMI activities had difficulties in fitting into the MOH and MSH program and resigned. Partners were informed and his replacement was decided with an interim plan providing closer short term technical assistance.
- MOP planning: SPS participated in the review and planning of the PMI activities in Angola, jointly with NGO partners and the NMCP. During this review, SPS presented its achievements and proposed activities for FY09.

- Stock situation monitoring: SPS reviewed stock availability at the national level (Angomedica), provincial level (Luanda) and in several health centers. The last review indicated stock outs of several blisters at Angomedica but delivery of a new procurement was already programmed at the end of the quarter.
- Pharmaceutical Management Information System: in the context of the overall development of health management information system and lack of functional PMIS, SPS/MSH is working with the NMCP and DNME in designing and implementing an electronic system for the Angomedica that will be subsequently scaled up at the provincial level. The DR TB option was presented to the MOH and further discussions will be handled to complete the assessment and implementation plan in coordination with country partners and the MSH electronic unit.
- Review program progresses and planning with PMI team and MOH (NMCP and DNME)
- Coordination with Chemonics SES for pharmaceutical management efforts

ARMENIA

Overview

RPM Plus received FY05 Armenia mission funds to support technical activities in pharmaceutical management. During Year 1, RPM Plus carried out an assessment of prescribing practices for five key PHC diagnoses, cost implications of these practices, and supply system performance. Main findings were discussed during the *Supply and Use of PHC medicines in Armenia* workshop, to validate the results of the analysis. Based on the results, RPM Plus prepared a technical report outlining key findings and the way forward to improve prescribing practices and pharmaceutical management system, in support of primary health care reform in the country. In February- March 2007, RPM Plus shared a draft report and discussed key findings and recommendations with the MOH officials, SCDMTE, SHA, NIH, YSMU, World Bank, WHO, marz and Yerevan health authorities and providers. The report was further disseminated through the workshops that were held in July-August, 2007. To follow up on the study findings and develop local capacity in understanding and addressing drug use issues, RPM Plus carried out a Training of Trainers (TOT) on Rational Use of Medicines (RUM) on July 16-20, 2007. Participants included 27 experts from YSMU, NIH, SHA, AUA, SCDMTE, and a group of practitioners from PHC facilities, who serve as preceptors in Family Medicine program. The training course was adapted to Armenia context and incorporated the findings and recommendations from RPM Plus study.

Major Activities this Quarter

In May 2007, RPM Plus contributed to a total of three trainings that were held by PHCR for managers of PHC facilities. Facilitators trained by RPM Plus during July 2007 and December 2007 Trainings of Trainers on Rational Use of Medicines (RUM) carried out RUM module/sessions during the PHCR's Management Training Seminars on May 6, May 8 and May 13, 2008. The RUM module carried out by the trainers was based on the training materials provided by RPM Plus during the Rational Use of Medicines course in December 2007. These materials were revised and adjusted by RPM Plus team, to meet the PHCR's objectives for the training of managers. RPM Plus covered all the costs related to the RUM sessions, including labor costs, printing and copying costs etc. Prior to the trainings, the RPM Plus and facilitators coordinated with the PHCR team regarding the content of each RUM session, shared experience from previous RUM trainings carried out by RPM Plus, discussed use of medicines issues raised by the managers of PHC facilities during previous trainings, and answered PHCR's questions etc. The participants and PHCR team highly evaluated the trainings (based on evaluation forms and discussion with PHCR). The PHCR team stressed the importance of RUM sessions for the managers and is planning to continue working with the RUM trainers during next year's Management Training program. The trainers participated in the PHCR's trainings were represented by the faculty members of YSMU and American University of Armenia. As demonstrated by the trainings in December 2007 and May 2008, the facilitators are ready to carry out the RUM course on a regular basis at YSMU and can contribute to further development of local capacity in understanding and addressing RUM issues.

Future Activities

NIH and YSMU are planning to adapt the RUM materials to be included in the RUM Methodology manual that will be used by both these institutions for the Family Physicians training/specialization program that trains about 280 family physicians every year. The RUM module will be included as a new 3 day component of this program starting September 2008. RPM Plus team is planning to visit Armenia in July 2008 to provide technical support for both institutions in preparing a final product that will be used not only within the scope of Family Physicians training program but also beyond - for the training of physicians in other specialties and pharmacists, as well as continued medical education programs. The senior management of YSMU and NIH is committed to the institutionalization of the RUM course and leads this process as a component of the health care education reform.

In addition to providing technical support for developing an RUM methodology manual, RPM Plus is also planning to develop and introduce a session on antimicrobial resistance (AMR) that will be included in the RUM course to be taught at YSMU and the NIH. This session will provide an introduction on the role of the health facility in managing and controlling AMR. The AMR session will be finalized in Armenia in July and added to the RUM training course

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 and ARV Rational Use for President's Mother and Child HIV Prevention Initiative (PMTCT) and the President's Emergency Plan for AIDS Relief (The Emergency Plan) in Ethiopia. Under this effort, RPM Plus will assist in national, regional, district, and health facility-level capacity development for delivery of ART services by ensuring access to and rational use of basic ART products through various interventions.

The eve of the Ethiopian Millennium (year 2000 according to the Ethiopian calendar) was observed on 11 September at the office in the presence of the staff of the three MSH projects: RPM Plus, SCMS and Care and Support. This was followed in three weeks with a two day retreat for introducing the three projects to the staff, introduce SPS, the follow-on project to RPM Plus, and jointly plan on coordination and harmonization of activities as appropriate.

Major Activities This Quarter

Provision of Technical Assistance/ Technical Activity Coordination

During the reporting quarter, RPMAs at different regions have participated in the national and regional supportive supervision organized by Federal HAPCO team to supervise the overall HIV/AIDS activities.

Consultative workshop on Modalities of Pharmacy Week Celebration was organized by Ethiopian Pharmaceutical Association (EPA) in collaboration with MSH/RPM Plus. Pharmacy Week 2008 will be celebrated with the theme "Pharmacists and the Public in Harmony for Better Health Care".

During the reporting period, the country office has received technical assistance visits from headquarters by Douglas Keene, RPM Plus Director, Alan Rogosch, finance and Gabriel Daniel Country Program Manager.

His Excellency Mr. Donald Yamamoto, US Ambassador to Ethiopia, together with USAID and head of Tigray Regional Health Bureau as well as other partners visited health facilities in the region. He appreciated the tremendous effort MSH exerts to improve the services at the health facilities.

Strengthening Pharmacy Human Resource Capacity

In the reporting quarter, RPM Plus/SPS in collaboration with the Drug Administration and Control Authority (DACA) has organized six training events in two rounds on Good community Pharmacy Practice (GCPP), Drug and Therapeutics Committee (DTC), and Drug Information

Service (DIS). A total of 116 professionals participated in the Drug and Therapeutics Committee (DTC), 119 the Drug Information Center (DIC), and 109 the GCPP training.

RPM Plus/SPS has organized a one day training to equip its regional pharmaceutical management associates (RPMAs) and other staff on new developments on the topic of Fixed Dose Combination (FDC)

On site trainings for data clerks and health staffs about the use of all MIS tools and SOP were given by MSH/RPM Plus Regional Pharmaceutical Associates

Site level Inventory Management of ARVs and related commodities

In the reporting period, a total of 328 ART sites (279 ongoing and 49 new) have received TA from RPM Plus. Compared with the previous quarter the number of ART sites has increased by 17.6%.

In June 2008, a total of 112,319 patients were enrolled at all ART sites, more by 13,758 patients or 13.9% as opposed to the previous quarter (March, 2008). Overwhelming majority (95%) were adults and nearly 95% have been enrolled in the government hospitals and health centers.

PMTCT supplies NVP tablet & syrup, NVP syringe and NVP dosing charts were supplied to new PMTCT sites and also to old sites that were having shortages.

ARV drugs with short shelf-life were redistributed to health facilities before they get expired and over stocked drugs are properly transferred between health facilities.

Improving Quality Assurance of ARVs and related commodities

In this quarter, draft manual on proper storage and handling of drugs at regional and facilities level prepared and reviewed; draft Laboratory Safety Manual approved and familiarized; Working Group from DACA and MSH established, TOR and work plan prepared and 20 ARVs, Anti-malarial, Anti TB etc. drugs selected for monitoring quality. An Internal Quality Audit Group was also formed to follow up the implementation of the quality management in the Lab and assessment made on the current status

Strengthening Site Level Pharmaceutical Information Management (PMIS and M&E)

During this reporting period, mentoring and supervision was given to 73 health facilities of different regions on how to use ADT (dispensing tool).. 25 computers and 18 backup drives have been distributed to ART sites and telephones and internet services were accessed to 27 and 10 health facilities respectively. Data validity checking was done for all regions and report prepared

Different MIS tools have been printed and distributed/refilled to all targeted Health Facilities, Manual inventory management tools supplied to 33 ART sites and manual PMIS introduced at 29 new ART sites. Standardized monitoring checklist for drug and therapeutics committee (DTC) has been developed and being field tested.

A statistical bulletin for RPM Plus/SPS was prepared and being commented by senior management team. The bulletin is expected to serve as good reference material.

RPM Plus had its regular quarterly Review Meeting for two days, where project achievements, challenges, lessons and success stories were presented.

Improve Infrastructure of Pharmacies, PMTCT sites and provide necessary equipment

During this quarter, facility renovation of 15 sites has been completed and construction work is progressing at 27 ART sites. Furthermore, different types of supplies (shelves, filing and storage cabinets, booth and others) have been provided to 26 health facilities and procurement of additional supplies is in progress.

SWAZILAND

Overview

The Regional HIV/AIDS program (RHAP) works in 10 countries in the southern region of Africa including five PEPFAR focus countries and five non-focus countries. The program has special focus in non-presence countries such as Lesotho and Swaziland which have HIV prevalence rates among the highest in the world. In these two countries, the program aims at increasing access to the full package of prevention, treatment, care and support activities necessary to accomplish the goals outlined in the Emergency Plan.

Following previous year's funding, RPM Plus used allocated RHAP FY 06 to continue improving and strengthening medicine and commodity supply systems in support of the scale-up of HIV/AIDS programs in Swaziland. Through this, it aims to address some of Swaziland's immediate health challenges, including HIV and AIDS, TB, child health, and primary health care services. RPM Plus works collaboratively with the Ministry of Health and Social Welfare (MOHSW) by offering technical assistance, training, the development of tools and the implementation thereof.

Major Activities This Quarter

During the reporting period, MSH/RPM Plus participated in the USG partners' meetings. Participation also took place at the stakeholders' workshop of the National Laboratory Services to define areas of potential collaboration. The program attended the M & E information dissemination workshop. The cohort analysis report, derived from the implementation of the Rx Solution, was presented for the first time. RPM Plus participated and gave a presentation during the Medical Symposium organized by the Swaziland National Antiretroviral Program. The symposium provided an opportunity to provide advocacy for RPM Plus Pharmacovigilance activities. Also, the program facilitated the activities of the Grants Management Solutions (GMS) consultant who is providing TA to NERCHA.

Supervisory visits to support medicine supply inventory management practices at the clinic level were undertaken during this quarter. Thus far, visits have been paid to 31 out of the 65 target facilities. This exercise is still ongoing and will be concluded in the next quarter.

The program is participating on the technical working committee to review the Job Aids and IEC information related to the WHO project. The project aims to adapt a pharmaceutical management guidance document for national use and is targeting dispensers and drug managers on pharmaceutical management procedures. RPM Plus also collaborated with the WHO consultant tasked with the reorganization of the CMS medicine inventory. Meanwhile, the program attended the WHO quantification workshop held in June 2008. Two members of staff from the national laboratory department were invited to attend the quantification training.

During this quarter, RPM Plus took a lead role in assisting with the development of the Round 8 proposal for the Global Fund in the area of pharmaceutical sector system strengthening. The

process involved also WHO, the chief pharmacist and the pharmacist in charge at the CMS. Several discussions took place to identify and develop consensus on the priority areas for the proposal.

The program provided technical support to the National Medicine Advisory Committee (NMAC) specifically on the prequalification exercise for the national tender as well as for the preparation of the tender document. The tender list was accepted and adopted.

A series of meetings were held with partners to discuss the cohort analysis report. These resulted in the consensus on definitions and the final report format. Also a request to add an additional field to allow analysis for age groups, gender and any other attributes was carried out.

Two training workshops on RxSolution took place in April with a total of 14 persons trained. TA to RxSolution users at facility level was provided. Databases from all 12 sites, using RxSolution, were analyzed. These included cohort, ARV pregnant women and clinical staging. With regard to the rollout of RxSolution to private facilities, visits were paid to Baylor and Simunye clinics to analyze existing databases. Furthermore, a database conversion tool was developed and implemented to convert Baylor's SQL database data to SQL server on which Rx Solution is based.

On the other hand, CMS is now expected to use the RxSolution tool to manage its inventory. As a first phase, the system will capture the ARVs. The existing system was thus assessed to map needs for transfer to the RxSolution database. By the end of June, the process of updating RxSolution with CMS ARV data was started.

Meetings were also held with representatives of SNAP and CMS to review the ARV code list used on RxSolution and to standardize the regimen code to a national code. The code list for adults' regimen was compiled. A method will be developed to update facility data for regimen changes before the end of June 2008. RPM Plus will continue to liaise with SNAP to have Baylor's data in order to generate reports.

FINANCIAL INFORMATION

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\$155,614,798.

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 8 obligations, cumulative funds obligated, quarter two expenditures, in addition to the cumulative to-date (October 1, 2000 to June 30, 2008) expenditures of US\$151,804,501 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 June 30, 2008, 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.

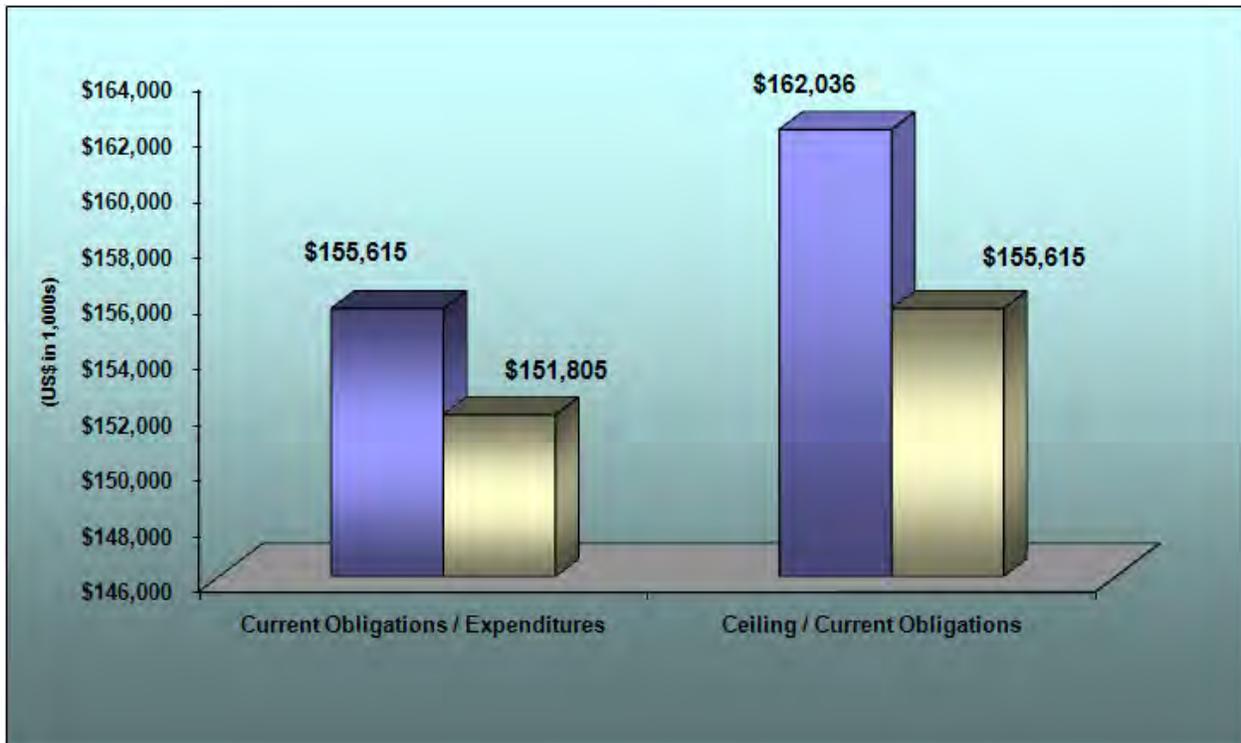
RPM Plus Activities and Products Status Report

Fiscal Data; Close of Fiscal Year 08, Quarter 3

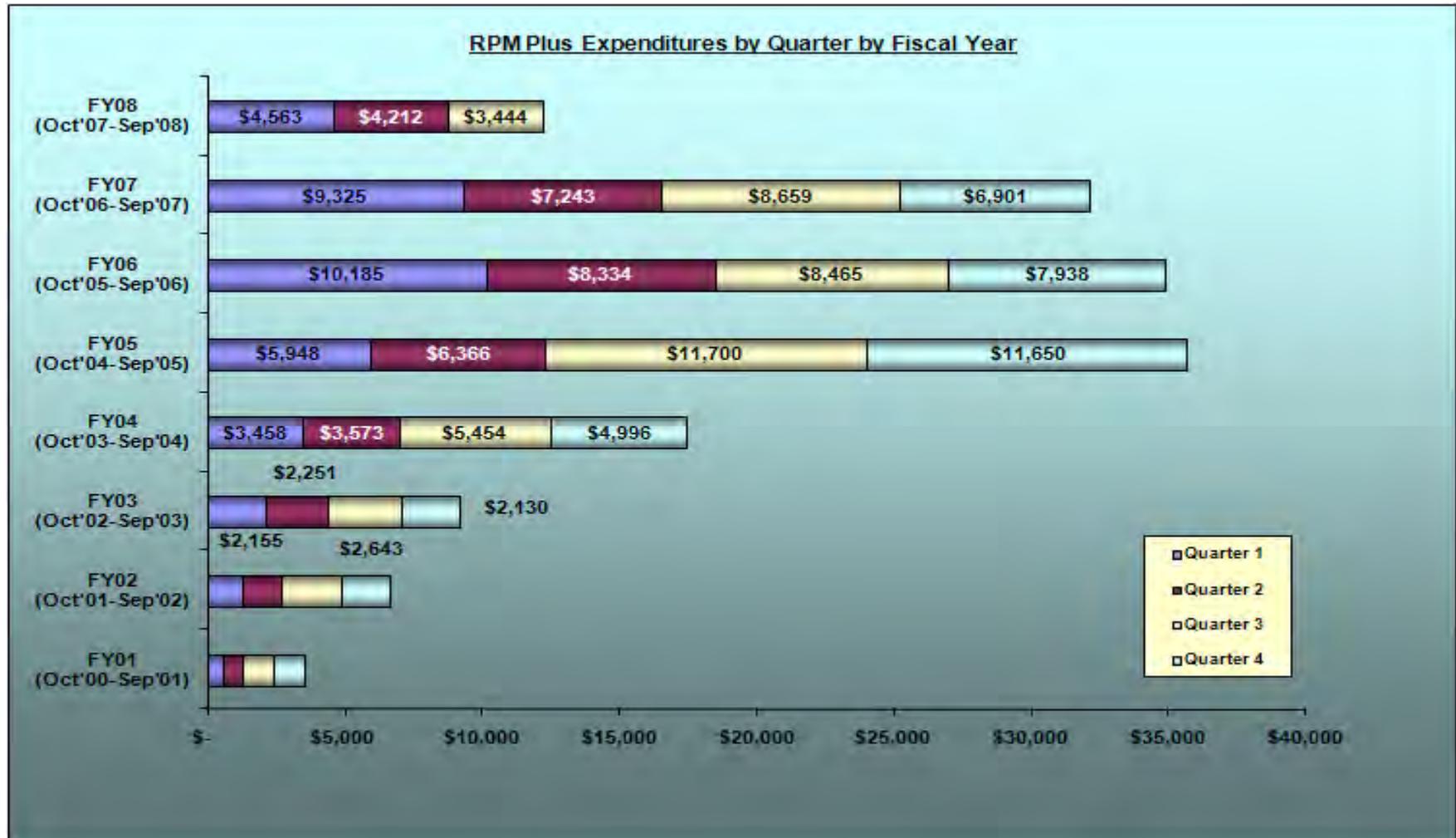
| Funding Source | Funding Type | Total Obligated Year 1 | Total Obligated Year 2 | Total Obligated Year 3 | Total Obligated Year 4 | Total Obligated Year 5 | Total Obligated Year 6 | Total Obligated Year 7 | Total Obligated Year 8 | Cumulative Obligated 30-Jun-08 | Q3 Expenditures Apr-Jun 2008 | Grand Total Spent 30-Jun-08 | Grand Total Remaining 30-Jun-08 |
|--------------------------------------|--------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|--------------------------------|------------------------------|-----------------------------|---------------------------------|
| Core | | | | | | | | | | | | | |
| SO1 POP | Core | \$ 100,000 | \$ 354,000 | \$ 230,000 | \$ 200,000 | \$ 250,000 | \$ 349,450 | \$ 315,000 | | \$ 350,000 | \$ 0 | \$ 382,513 | (\$42,513) |
| SO2 Maternal Health | Core | \$ 275,840 | \$ 587,000 | \$ 573,280 | \$ 745,000 | \$ 230,000 | \$ 725,000 | \$ 950,000 | | \$ 1,954,290 | \$33,825 | \$ 1,984,347 | \$19,943 |
| SO3 Child Survival * | Core | \$ 269,440 | \$ 587,000 | \$ 573,280 | \$ 745,000 | \$ 725,000 | \$ 568,100 | \$ 950,000 | | \$ 4,417,820 | \$103,370 | \$ 4,405,948 | \$11,872 |
| SO4 Sub Total | | \$ 200,000 | \$ 650,000 | \$ 900,000 | \$ 1,300,000 | \$ 800,000 | \$ 500,000 | \$ 1,120,000 | \$ - | \$ 5,470,000 | \$31,584 | \$ 5,402,974 | \$67,026 |
| SO5 ID/AMR | Core | \$ 574,387 | \$ 1,175,000 | \$ 1,205,000 | \$ 1,200,000 | \$ 1,520,000 | \$ 1,482,450 | \$ 1,000,000 | | \$ 8,156,837 | \$31,442 | \$ 8,152,536 | \$4,301 |
| SO5 Malaria | Core | \$ 420,000 | \$ 420,000 | \$ 420,000 | \$ 420,000 | \$ 866,725 | \$ 297,000 | | | \$ 1,593,725 | \$0 | \$ 1,640,555 | (\$66,830) |
| SO5 Malaria/MAC | Core | \$ - | \$ - | \$ 1,325,000 | \$ 1,150,000 | \$ 1,600,000 | \$ 1,100,000 | \$ 600,000 | | \$ 5,175,000 | \$0 | \$ 5,092,116 | \$82,885 |
| SO5 ID/TB | Core | \$ 410,333 | \$ 810,000 | \$ 1,200,000 | \$ 1,250,000 | \$ 1,188,000 | \$ 1,290,000 | \$ 1,120,000 | | \$ 7,268,333 | \$34,557 | \$ 7,240,641 | \$27,692 |
| 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 | \$65,999 | \$ 22,125,849 | \$58,046 |
| Common Agenda | Core | \$ 800,000 | \$ 1,030,538 | \$ 1,650,000 | \$ 973,000 | \$ 773,000 | \$ 800,000 | \$ 773,940 | | \$ 6,800,478 | \$0 | \$ 6,800,466 | \$12 |
| Mainstreaming | Core | \$ - | \$ - | \$ - | \$ - | \$ 135,000 | \$ - | \$ 123,500 | | \$ 321,010 | \$13,716 | \$ 211,057 | \$109,953 |
| Bureau/Field Support Funds | | \$ 2,630,000 | \$ 5,026,538 | \$ 7,083,280 | \$ 6,818,000 | \$ 8,087,725 | \$ 6,449,510 | \$ 5,402,440 | \$ - | \$ 41,497,493 | \$248,494 | \$ 41,273,154 | \$224,339 |
| LAC/SPO-PMTCT | FS | \$ - | \$ - | \$ - | \$ - | \$ 1,200,000 | \$ - | \$ - | | \$ 1,081,000 | \$ - | \$ 1,139,235 | \$60,765 |
| Africa Bureau Sub Total | | \$ 290,000 | \$ 700,000 | \$ 250,000 | \$ 650,000 | \$ 250,000 | \$ 70,000 | \$ - | \$ - | \$ 2,210,000 | \$0 | \$ 2,221,019 | (\$11,019) |
| Asia/Near East Bureau/ID | | \$ 200,000 | \$ 150,000 | \$ 590,000 | \$ 400,000 | \$ - | \$ - | \$ - | \$ - | \$ 1,340,000 | (\$557) | \$ 1,335,080 | \$4,920 |
| RDMA Sub Total | | \$ - | \$ - | \$ - | \$ - | \$ 980,000 | \$ 800,000 | \$ 600,000 | \$ - | \$ 2,380,000 | \$295,840 | \$ 1,835,151 | \$544,849 |
| GPIH NGOs/CFDA | FS | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 120,000 | | \$ 170,000 | \$1,425 | \$ 160,013 | \$9,987 |
| E and E Bureau | FS | \$ 50,000 | \$ 235,000 | \$ 685,000 | \$ 505,000 | \$ 40,000 | \$ 50,000 | \$ - | | \$ 1,515,000 | \$21,354 | \$ 1,433,259 | \$81,741 |
| REDSO Sub Total | | \$ 300,000 | \$ 315,000 | \$ 320,000 | \$ 800,000 | \$ 725,000 | \$ 340,000 | \$ 357,000 | \$ - | \$ 3,157,000 | \$0 | \$ 3,233,041 | (\$76,041) |
| WARP Sub Total | | \$ - | \$ - | \$ - | \$ 250,000 | \$ 340,000 | \$ 500,000 | \$ 150,000 | \$ - | \$ 1,240,000 | \$0 | \$ 1,227,180 | \$12,820 |
| LAC Bureau Sub Total | | \$ 195,000 | \$ 101,571 | \$ 510,000 | \$ 780,000 | \$ 660,000 | \$ 650,000 | \$ 630,000 | \$ - | \$ 3,495,571 | \$107,833 | \$ 3,379,952 | \$125,619 |
| 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 | \$426,979 | \$ 15,954,931 | \$753,640 |
| Regional Mission Funds | | | | | | | | | | | | | |
| MAC Mission Funding | | | | | | | | | | | | | |
| REDSO FS | | | | \$50,000 | \$25,000 | \$175,000 | \$100,000 | | | \$350,000 | \$0 | \$331,012 | \$18,988 |
| Democratic Rep. Of Congo FS | | | | \$10,000 | | \$200,000 | \$100,000 | | | \$310,000 | \$0 | \$309,562 | \$438 |
| Ghana FS | | | | \$125,000 | \$150,000 | \$150,000 | | | | \$425,000 | \$27,752 | \$425,982 | (\$982) |
| 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 | \$27,596 | \$321,142 | \$3,858 |
| Mali FS | | | | | | \$100,000 | \$125,000 | | | \$225,000 | \$0 | \$226,953 | (\$1,953) |
| Nigeria FS | | | | \$100,000 | \$25,000 | \$100,000 | | | | \$225,000 | \$0 | \$226,953 | (\$1,953) |
| Rwanda FS | | | | \$25,000 | | \$100,000 | | | | \$125,000 | \$0 | \$101,762 | \$23,238 |
| Senegal MAARD | | | | \$100,000 | | \$150,000 | | | | \$250,000 | \$0 | \$242,957 | \$7,043 |
| WARP FS | | | | \$38,750 | | \$191,250 | | | | \$230,000 | \$0 | \$237,591 | (\$7,591) |
| MAC Mission Funding Sub Total | | \$ - | \$ - | \$ 498,750 | \$ 334,500 | \$ 1,116,250 | \$ 625,000 | \$ - | \$ - | \$ 2,574,500 | \$55,348 | \$ 2,571,385 | \$3,115 |
| Albania | FS | | \$300,000 | | \$100,000 | | | | | \$400,000 | \$15,054 | \$329,428 | \$70,572 |
| Armenia | FS | | | | \$100,000 | | \$500,000 | \$1,000,000 | | \$1,500,000 | \$37,868 | \$1,298,107 | \$201,893 |
| Central Asia Regional | | | | | | | | | | | | | |
| Kazakhstan | FS | | | \$50,000 | | | | | | \$100,000 | \$0 | \$98,784 | \$1,216 |
| Kyrgyzstan | FS | | | \$50,000 | \$50,000 | | | | | \$100,000 | \$1,504 | \$98,730 | \$1,270 |
| Moldova | FS | | | \$100,000 | | \$175,000 | | | | \$275,000 | \$20,036 | \$236,526 | \$38,474 |
| Romania | FS | | | \$150,000 | | | | | | \$150,000 | \$0 | \$150,465 | (\$465) |
| Tajikistan | FS | | | \$50,000 | | | | | | \$102 | \$0 | \$46,315 | \$3,685 |
| Turkmenistan | FS | | \$91,208 | | | | | | | \$91,208 | \$0 | \$81,551 | \$9,657 |
| Uzbekistan | FS | | \$108,792 | \$100,000 | \$100,000 | | | | | \$308,792 | \$0 | \$302,553 | \$6,239 |
| Brazil | FS | | | \$798,000 | | \$350,000 | \$250,000 | \$400,000 | | \$1,798,000 | \$2,607 | \$1,792,576 | \$5,424 |
| Dominican Republic | MAARD | | \$103,389 | \$100,000 | | \$100,000 | \$100,000 | \$30,000 | | \$433,389 | \$0 | \$431,361 | \$2,028 |
| Haiti Sub Total | | \$ - | \$ 110,000 | \$ 100,000 | \$ 1,390,000 | \$ 1,950,000 | \$ 3,750,000 | \$ - | \$ - | \$ 7,300,000 | \$2,009 | \$ 6,755,753 | \$544,247 |
| Honduras Mission | FS | \$30,000 | \$50,000 | | | | | | | \$80,000 | \$0 | \$67,868 | \$12,132 |
| Mexico | MAARD | | | | | | | \$49,957 | | \$49,957 | \$0 | \$49,430 | \$527 |
| Nicaragua | FS | | | \$100,000 | \$150,000 | \$394,581 | \$90,000 | \$50,000 | | \$784,581 | \$24,592 | \$793,785 | (\$9,204) |
| 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 | \$100,000 | \$150,000 | | | \$400,000 | \$0 | \$406,806 | (\$6,806) |
| India | FS | | | | | | | | | \$0 | \$0 | \$0 | \$0 |
| Nepal | FS | | \$413,000 | \$300,000 | | | | | | \$713,000 | \$991 | \$705,061 | \$7,939 |
| Vietnam | FS | | | | | \$1,000,000 | \$2,847,000 | | | \$4,028,990 | (\$5,528) | \$3,969,800 | \$59,190 |
| Angola PMI | FS | | | | | | | \$100,000 | | \$52,479 | \$0 | \$90,110 | \$39,890 |
| Malawi | FS | | | | | | | \$200,000 | | \$200,000 | \$0 | \$202,851 | (\$2,851) |
| Benin | MAARD | | | | | \$50,000 | | | | \$50,000 | \$0 | \$49,756 | \$244 |
| 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 | \$2,493,933 | \$ 34,599,493 | \$1,787,507 |
| Kenya Sub Total | | \$ - | \$ - | \$ - | \$ 1,737,000 | \$ - | \$ 2,194,850 | \$ 4,496,000 | \$ - | \$ 8,427,850 | \$19 | \$ 8,407,131 | \$20,719 |
| Namibia Sub Total | | \$ - | \$ - | \$ - | \$ 835,000 | \$ 1,177,000 | \$ 1,742,100 | \$ 1,970,795 | \$ 600,000 | \$ 6,324,895 | \$38 | \$ 6,327,383 | (\$2,488) |
| Rwanda Sub Total | | \$ - | \$ - | \$ - | \$ 1,600,000 | \$ 665,000 | \$ 1,938,109 | \$ 2,809,465 | \$ 300,000 | \$ 7,312,574 | \$21,449 | \$ 7,283,449 | \$29,125 |
| Senegal PMI FS | | | | | \$150,000 | \$150,000 | | \$75,000 | | \$375,000 | \$0 | \$375,000 | \$0 |
| Senegal MAARD | | | | | \$150,000 | \$150,000 | | \$75,000 | | \$375,000 | \$0 | \$375,000 | \$0 |
| Senegal Sub Total | | \$ - | \$ - | \$ - | \$ 150,000 | \$ 150,000 | \$ - | \$ 75,000 | \$ - | \$ 750,000 | \$0 | \$ 750,000 | \$0 |
| South Africa Sub Total | | \$ - | \$ - | \$ - | \$ 1,000,000 | \$ 1,400,000 | \$ 2,550,000 | \$ 3,600,000 | \$ - | \$ 8,550,000 | \$53,589 | \$ 8,606,970 | \$43,030 |
| Sudan | | | | | | \$400,000 | \$600,000 | | | \$1,000,000 | (\$9,290) | \$1,021,776 | (\$21,776) |
| Tanzania Sub Total | | \$ - | \$ - | \$ - | \$ - | \$ 1,150,000 | \$ 1,440,000 | \$ 150,000 | \$ - | \$ 2,740,000 | \$1,377 | \$ 2,738,403 | \$1,597 |
| Uganda Sub Total | | \$ - | \$ 500,000 | \$ 500,000 | \$ - | \$ 1,000,000 | \$0 | \$ 1,000,063 | (\$63) |
| Zambia Sub Total | | \$ 100,000 | \$ 280,000 | \$ 780,000 | \$ 1,865,000 | \$ - | \$ - | \$ - | \$ - | \$ 3,025,000 | \$0 | \$ 3,023,203 | \$1,797 |
| Mission | | \$ 330,000 | \$ 1,456,389 | \$ 2,328,750 | \$ 13,909,500 | \$ 11,577,831 | \$ 40,667,059 | \$ 24,632,217 | \$ 2,506,990 | \$ 97,408,738 | \$2,768,178 | \$ 94,576,416 | \$2,832,320 |
| ACF Surplus/(Deficit) | | | | | | | | | | | | (\$0) | |
| Grand Total | | \$ 3,995,000 | \$ 7,984,498 | | | | | | | | | | |

**Rational Pharmaceutical Management Plus Financial Status
Overview
Cumulative Expenditure activity through June 30, 2008**

| | |
|----------------------------------|---------------------|
| Total Funding Received to date: | \$155,614,798 |
| Total Amount Spent to date: | \$151,804,501 |
| Pipeline: | \$3,810,297 |
| Percent of Funds Spent: | 97.55% |
| 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 June 30, 2008**



RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Mainstreaming Initiative **Year** 04**Activity Title** Information dissemination through SOTAs, brown bags, etc.**Activity Manager** Miralles, Maria **Activity #** 3 **Task:** A1WW04MNS **Sub-Task:** 60G2D3**Activity Description** Activities will include participation in MI committee meetings to discuss the direction and priorities of the initiative, meetings with other CAs and USAID to promote application of the tools, including brown bags, SOTA's etc,

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | The MSA tool was introduced in a workshop organized by HS20/20 at the 2008 Global Health Council annual conference in Washington DC. RPM Plus staff participated through facilitation of small work groups as well as in plenary discussions. The workshop was very well attended. | | | | |

Last Updated: 06/05/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** HIV-PMTCT**Year** 03**Activity Title** Evaluate, update and web-enable Guidance Document**Activity Manager** Akhlaghi, Laila**Activity #** 9**Task:** A1WW03HIP**Sub-Task:** 60CXD9**Activity Description** The guidance document will be evaluated based on feedback from users. Review and update will take place and an interactive version will be created for the website.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-----------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | No progress in this quarter | Technical reviewer did not have time available in this quarter to review the document | The internal technical review will be completed in the next quarter. The final draft of the updated document will then be submitted for a final review. | | |

Last Updated: 06/27/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Maternal Health **Year** 06**Activity Title** Support implementation of interventions in two to four selected countries to improve the management of uterotonics in support of**Activity Manager** Leopold, Jennifer **Activity #** 2 **Task:** A1WW06RPH **Sub-Task:** 60F5H2**Activity Description** In addressing these challenges, RPM Plus will work with the MoHs and partner agencies currently working to expand AMTSL to support their current efforts. This may include working at the national and/or the facility level, with the central medical stores to improve storage practices and estimation of needs, providing assistance with facility-level quantification and training, and incorporating pharmaceutical management issues in pre- and in-service training of care providers.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued activities will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Maternal Health**Year** 06**Activity Title** Provide technical assistance on pharmaceutical management components of the POPPHI project as requested.**Activity Manager** Nfor, Emmanuel**Activity #** 4**Task:** A1WW06RPH**Sub-Task:** 60F5H4**Activity Description** An important aspect of the implementation of the POPPHI project is the availability and use of uterotonics. Technical support will be provided as needed to appropriately address these pharmaceutical issues in different countries.

POPPHI is playing an active role in the current policy debate and growing support for the use misoprostol in the prevention and treatment of PPH. These developments may result in the adoption of new treatment protocols and a range of issues needing increased consideration, including selection and quantification of medicines, level of care authorized to use, training and supervision of providers, and the option of use at the community level.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued activities will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

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 8 Q3 | This budget line is now closed. The intervention guide has been completed and is undergoing editing and translation into French. Continued activities related to the intervention guide will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival **Year** 06**Activity Title** Technical Activity coordination and monitoring**Activity Manager** Adeya, Grace**Activity #** 1**Task:** A1WW06CHS**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 8 Q3 | This budget line and activity are now closed and completed. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival **Year** 06**Activity Title** Support for ADDO program in Tanzania**Activity Manager** Adeya, Grace**Activity #** 2**Task:** A1WW06CHS**Sub-Task:** 60C5H2

Activity Description RPM Plus will continue to support TFDA and other stakeholders in developing an implementation model for the ADDO program that is capable of nation-wide implementation. Specifically this year, there will be a focus on integrating the ADDO child survival training module into the ADDO training for roll-out, but also on catch up training on those regions where ADDO has been implemented without the child survival component (expected to be Morogoro,district). In conjunction with BASICS, RPM Plus will ensure the use of appropriate job aids by the dispensers and support information, education and communication (IEC) interventions at community level to promote use of the ADDOs. A follow-up evaluation (a repeat of the quantitative baseline conducted in September 2006) will be required to evaluate the child survival package.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued ADDO program activities in Tanzania will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival**Year** 06**Activity Title** Other Private Sector Initiatives**Activity Manager** Adeya, Grace**Activity #** 4**Task:** A1WW06CHS**Sub-Task:** 60A2H4

Activity Description In Senegal, RPM Plus will continue to support the MoH and syndicate of pharmacists to set up and establish a regular supervision mechanism to monitor the performance of the sales assistants in private pharmacies. The intervention package of training and follow-up will be evaluated.

In addition, RPM Plus will continue to build from initial assessment trips and the evaluation of home based management of malaria in Rwanda. In collaboration with partners (particularly BASICS), RPM Plus will further investigate and develop a private sector strategy to improve child health services in the private sector, where appropriate.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued private sector activities will appear under the Strengthening Pharmaceutical Systems program activity reports | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival**Year** 06**Activity Title** Community Case Management of ARI, malaria and diarrhea**Activity Manager** Adeya, Grace**Activity #** 5**Task:** A1WW06CHS**Sub-Task:** 60EXH5

Activity Description Technical assistance will be focused on the development of programs targeted in specific countries and training materials for community agents, pharmaceutical distribution systems, and ongoing monitoring, supervision and evaluation mechanisms. Where possible, the new WHO recommendation will be applied into practice emphasizing that a three day course of antibiotics is sufficient, minimizes cost and facilitates compliance. Collaboration will continue with partners to accelerate the CCM global agenda and scale-up of CCM activities including support to CORE group initiatives as appropriate.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued community case management activities will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival**Year** 06**Activity Title** TA to roll-out zinc treatment**Activity Manager** Adeya, Grace**Activity #** 6**Task:** A1WW06CHS**Sub-Task:** 60BXH6

Activity Description Technical assistance will be provided as needed in developing, reviewing and revising treatment guidelines, assessment tools, and supervision and evaluation mechanisms to facilitate the implementation and sustainability of zinc treatment for diarrhea management at the global and national levels. This TA will be targeted at focus countries as indicated by USAID, the Zinc Task force or other partners in the implementation of zinc roll-out such as BASICS and A2Z.

At the country level, RPM Plus will continue to collaborate with partners in DRC, to provide technical assistance in the form of reviewing national job aids, training, advocacy and dissemination materials, and developing standardized assessment, supervision, evaluation and monitoring tools to evaluate the feasibility and track the introduction of zinc in country.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued activities related to the introduction and scale-up with zinc treatment will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Child Survival**Year** 06**Activity Title** Mainstreaming pharmaceutical management into the global child survival agenda**Activity Manager** Adeya, Grace**Activity #** 8**Task:** A1WW06CHS**Sub-Task:** 60F6H8

Activity Description RPM Plus will continue to work in coordination with WHO (HQ and AFRO) and UNICEF to integrate aspects of pharmaceutical management into the revisions of the IMCI package and training materials, and the monitoring and evaluation tools. RPM Plus will also work with BASICS, the CORE group and PVOs to assure the soundness of the pharmaceutical management aspects of their activities. Advocacy will continue with WHO Geneva using evidence and experience from RPM Plus' collaborative work with WHO AFRO to push for incorporation of pharmaceutical management as a standard component in IMCI trainings and surveys across the board, in all countries.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | This budget line and activity are now closed and completed. Continued activities related to mainstreaming pharmaceutical management into the global child survival agenda will appear under the Strengthening Pharmaceutical Systems program activity reports. | | This budget line is now closed. Continued activities under the Strengthening Pharmaceutical Systems (SPS) program are reported under SPS activity reports. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: HIV/AIDS**Year** 04**Activity Title** Development of "Commodity Management in ART Programs: A Planning Guide"**Activity Manager** Walkowiak, Helena**Activity #** 2**Task:** A1WW04HIV**Sub-Task:** 60F2E2

Activity Description This publication entitled "From the Ground Up" targets health care providers, trainers, policy makers and planners and will provide them with up-to-date insights and lessons-learned from HIV/AIDS programs around the globe. RPM Plus has received a request from EGPAF to contribute two chapters to the publication; one on the Scaling-up of Pharmacy Services: Managing Medicines and Supplies and the second on The Role of the Pharmacist in ART. The chapters are intended to assist a range of audiences who are currently or are planning to support ART service delivery and ART service implementers, to systemize their approaches to strengthening pharmaceutical management for going to scale.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | RPM Plus reviewed and commented on the final drafts and responded to comments in this quarter. | | EGPAF will send copies of the final versions of the two chapters that RPM Plus has prepared for the book. These documents will be submitted by RPM Plus to USAID as final products. | | |

Last Updated: 06/27/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**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.**Project
Year 8 Q3**

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| The document has been revised to incorporate the majority of the comments suggested by our partners FHI in this quarter. | | Some minor revisions are needed and the updated document will be submitted to editing by the end of the next quarter. | | |

Last Updated: 06/27/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: HIV/AIDS**Year** 05**Activity Title** Mombasa Evaluation and Dissemination**Activity Manager** Walkowiak, Helena**Activity #** 11**Task:** A1WW05HIV**Sub-Task:** 60F2IA**Activity Description** In FY05, RPM Plus will evaluate RPM Plus activities to support ART program initiation and rollout in Mombasa and disseminate successes, lessons learned, tools and approaches to inform program planners tasked with expanding access to treatment.

This activity is scheduled to begin in Q3

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|---------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | The 2002 assessment report was assembled in this quarter for submission as a final product. | | The report will be reviewed in the next quarter and submitted to USAID. | | |

Last Updated: 06/27/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**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 |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | RPM Plus continued to contribute to the development of an "Operations Manual for Delivery of HIV Prevention, Care and Treatment at Primary Health Centres in High Prevalence, Resource Constrained Settings" and accompanying country "Adaptation Guide" and "Basic HIV Services" document as part of a WHO-USG collaboration around the scale-up of HIV services in resource-constrained settings of high HIV prevalence. Activities in this quarter include reviewing and commenting on two chapters from the Operations Manual and 5 chapters from the Basic HIV Services Manual. RPM Plus also responded to a request to contribute forms for the Supply Management chapter of the Operations Manual. | | In the next quarter, RPM Plus will continue to support the finalizing of the WHO-OGAC publication "Operations Manual for Delivery of HIV Prevention, Care and Treatment at Primary Health Centres in High Prevalence, Resource Constrained Settings" as requested. | | |

Last Updated: 06/27/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Asia Near East Bureau**Year** 04**Activity Title** Provide TA to strengthen the pharmaceutical management capacity of selected institutions in the ANE region**Activity Manager** Duzey, Olya**Activity #** 11**Task:** AIRN04IDX**Sub-Task:** 60CXH8**Activity Description** RPM Plus in collaboration with USAID, WHO and other stakeholders will select organizations for RPM Plus technical assistance. It is anticipated that such organizations will work on drug management issues of local importance and by doing so, strengthen their capacity to provide TA to neighboring countries. This activity will take place in 3rd and 4th quarters of RPM Plus Year 5.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | As a follow-up to the November 2007 "Regional Training Course on Pharmaceutical Management and Quantification for Malaria" in Hanoi, Vietnam, RPM Plus, in conjunction with ACTMalaria, began developing a web-based forum—including a webpage giving an overview of general pharmaceutical management of malaria with links to user manuals and tools—to facilitate discussions among course participants on the progress of country improvement plans to address pharmaceutical management and quantification of antimalarials. | | RPM Plus technical staff will moderate discussions to elicit experience sharing and address common challenges. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 05**Activity Title** Provide TA in development and implementation of interventions to enhance access to antimalarials**Activity Manager** Duzey, Olya**Activity #** 5**Task:** A1RN05IDX**Sub-Task:** 60F4H5**Activity Description** RPM Plus will work with one country to adapt or develop and implement interventions to enhance access to antimalarials. It is anticipated that RPM Plus will work with in-country partners to implement and monitor interventions.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | In the fall of 2007, RPM Plus received a request from the Thai MOH/Bureau of Vector Borne Diseases and KI/Asia/BAAM to provide TA to assess Thai procurement and distribution practices and plans under GFATM Round 7. This quarter, RPM Plus traveled to Thailand to discuss a timeline, finalize plans, and begin data collection for this activity. | | In July 2008, RPM Plus will conduct a workshop in Bangkok, Thailand to review and verify the results of the data collection activity. Following the workshop, RPM Plus will provide the findings and recommendations to KIA/BAAM for consideration and integration into their activities. | | |

Last Updated: 07/10/2008

Workplan: Regional Development Mission/Asia **Year** 05**Activity Title** Provide TA in development and implementation of interventions to enhance access to antimalarials**Project
Year 8 Q3**

RPM Plus received a request from the Lao PDR Center for Malariology, Parasitology, and Entomology (CMPE), the Global Fund (GF) principle recipient (PR) office, and WHO to provide technical assistance in the management of ACTs and other commodities for malaria. During discussions with the National Malaria Program (CMPE) and the Office of the Principal Recipient of the Global Fund RPM Plus helped identify three priority areas-- quantification, inventory management and reporting systems. RPM Plus provided immediate assistance with quantification of anti-malarial commodities during a visit in April. Data collection for a rapid assessment of inventory management and reporting systems focusing on the district and village levels began at the end of June 2008.

Based on the results of the rapid assessment, RPM Plus will provide technical assistance (TA) to address the GF conditions precedent for 2nd and 3rd disbursement of Round 7 (i.e. related to storage, inventory management and reporting).

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 05**Activity Title** Provide TA in training and implementing revised systems and SOPs in TB pharmaceutical management**Activity Manager** Dias, Vimal**Activity #** 7**Task:** A1RN05IDX**Sub-Task:** 60F3H7**Activity Description** RPM Plus will provide technical assistance in developing a training plan and materials for implementation of SOPs. This activity will be carried out in close collaboration and co-funding from the WHO/China. It is anticipated that, one these SOPs are implemented and refined, a plan for scaling them up to other provinces will be developed.**Project
Year 8 Q3**

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|--------------------------|-----------------------------|-------------------|-------------------------|-----------------------------|
|--------------------------|-----------------------------|-------------------|-------------------------|-----------------------------|

In March 2008, RPM Plus presented to the Chinese National Center for Tuberculosis Control and Prevention (NCTB) an SOP manual for managing second line TB medicines. The manual was finalized in late June and will be presented to NCTB counterparts during a visit in July. The NCTB plans to merge all or part of the SOP, focusing on the quantification tool, with the first line manual and integrated it into their existing training and skills dissemination program.

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 05**Activity Title** Provide follow up TB to one or more RDMA countries to improve access to ARVs and other medicines for HIV/AIDS)**Activity Manager** Duzey, Olya**Activity #** 9**Task:** A1RN05IDX**Sub-Task:** 60F2H9**Activity Description** As a follow up to the quantification course, RPM Plus and the Mission agreed to provide technical assistance to the Lao PDR and China in HIV/AIDS pharmaceutical management. Under this activity, RPM Plus will explore with country counterparts what kind of technical assistance is necessary, and work with counterparts to build on existing systems to strengthen their ability to manage ARVs and other commodities for HIV/AIDs.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | RPM Plus visited Laos in April to evaluate the pharmaceutical management systems for ordering and managing HIV test kits at ART sites and VCT centers. RPM Plus debriefed the Center for HIV/AIDS & Sexually Transmitted Infections (CHAS) on the findings of the site evaluations and recommendations for immediate and mid-term systems strengthening to facilitate the transition of management of ARVs and other commodities from MSF to the MOH/CHAS. | | This code closed in the middle of this quarter. Activities under this code will be continued under FY06 code A1RN06IDX 60F2H5. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 06**Activity Title** Provide follow up TA for the management of second line anti-TB medicines to one or more countries in the RDMA region**Activity Manager** Vrakking, Hugo**Activity #** 10**Task:** A1RN06IDX**Sub-Task:** 60F3H0**Activity Description** RPM Plus will follow up with participants of the workshop on the management of medicines for MDR TB to gauge their progress, identify barriers to implementation, and develop country specific strategies for surmounting those barriers.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | <p>In November 2007, RPM Plus facilitated a course on "Pharmaceutical Management of Multi-Drug Resistant Tuberculosis" in collaboration with WHO/WPRO, the GDF, and the Green Light Committee (GLC). Between May and July 2008, these partners conducted three out of five joint country-based follow-up workshops in Mongolia, Vietnam, and the Philippines with two more (China and Cambodia) to be completed by July 2008. Objectives of this follow up TA were to:</p> <ul style="list-style-type: none">• evaluate progress with participants in implementing improvement plans• provide customized assistance in refining country improvement plans and addressing challenges to progress | | <p>The Mongolian NTP requested future technical assistance from RPM Plus to strengthen storekeeping, inventory management and quantification. Participants were particularly keen on the quantification tool demonstrated during the workshop--initially developed for the Chinese 2nd line SOP manual--which they would like to use in their program. Use of the tool would require adaptation and training. RPM Plus will consider the request for additional TA in light of funding and resource constrains as RPM Plus activities end and SPS activities begin.</p> | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 06**Activity Title** Disseminate findings and lessons learned**Activity Manager** Duzey, Olya**Activity #** 3**Task:** A1RN06IDX**Sub-Task:** 60GXH3**Activity Description** RPM Plus will share findings in country level and international meetings, and continue development of Web-based sharing of findings, tools, and lessons learned. RPM Plus will collaborate with the WHO and other partners to identify and make available tools that may be utilized by counterparts in ANE countries or other regions, and share reports, findings, and other information about RPM Plus approaches and interventions to addressing drug management issues, as well as progress on achieving desired outcomes.

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|--------------------------|-----------------------------|-------------------|-------------------------|-----------------------------|
|--------------------------|-----------------------------|-------------------|-------------------------|-----------------------------|

**Project
Year 8 Q3**

RPM Plus participated in the bi-annual Mekong Malaria Partners Meeting in April 2008 in Bangkok, Thailand. The purpose of the meeting was to facilitate partner discussion, review activities and present workplans. As with previous meetings, partners focus on identifying complementary areas for collaboration in the region.

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 06**Activity Title** Provide TA to plan and implement activities to increase availability and use of antimalarials**Activity Manager** Yeager, Beth**Activity #** 4**Task:** A1RN06IDX**Sub-Task:** 60F4H4**Activity Description** During this fiscal year, RPM Plus will provide additional support to increase availability and distribution of antimalarials in focus countries, as agreed with the RDMA and partners. Such assistance will be coordinated to complement activities planned under Global Fund grants, the primary external funding source for ACTs in the region.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | As a follow-up to the November 2007 "Regional Training Course on Pharmaceutical Management and Quantification for Malaria" in Hanoi, Vietnam, RPM Plus, in conjunction with ACTMalaria, began developing a web-based forum—including a webpage giving an overview of general pharmaceutical management of malaria with links to user manuals and tools—to facilitate discussions among course participants on the progress of country improvement plans to address pharmaceutical management and quantification of antimalarials. | | RPM Plus technical staff will moderate discussions to elicit experience sharing and address common challenges. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 06**Activity Title** Provide pharmaceutical management TA to one RDMA country, which has received GFATM funding for HIV/AIDS**Activity Manager** Clark, James**Activity #** 5**Task:** A1RN06IDX**Sub-Task:** 60F2H5

Activity Description In this fiscal year, RPM Plus will provide technical assistance, as agreed with the RDMA, the US Embassy in those countries, and counterpart organizations, to improve access to ARVs and other commodities. The country selected for this TA is Laos. Once the evaluation of existing and scale up sites is completed, RPM Plus will develop or refine systems that will be used to manage ARVs and other commodities during the transition from MSF to MOH management of the program.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | RPM Plus visited Laos in April to evaluate the pharmaceutical management systems for ordering and managing HIV test kits at ART sites and VCT centers. RPM Plus debriefed the Center for HIV/AIDS & Sexually Transmitted Infections (CHAS) on the findings of the site evaluations and recommendations for immediate and mid-term systems strengthening to facilitate the transition of management of ARVs and other commodities from MSF to the MOH/CHAS. One of activities agreed upon during those discussions, was for RPM Plus to prepare a standard operating procedures (SOP) manual for processing resupply requests from ART sites. During this quarter, RPM Plus also began development of SOPs and tools for key pharmaceutical management functions including quantification, medication counseling practices, ordering and receiving and distribution. | | In the next quarter, RPM Plus will continue to assist in developing implementation plans at the site level including training site staff in preparation for the handover of ART management. | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Regional Development Mission/Asia **Year** 06**Activity Title** Provide technical assistance to strengthen the capacity of counterparts to manage medicines for TB**Activity Manager** Duzey, Olya**Activity #** 6**Task:** A1RN06IDX**Sub-Task:** 60F3H6**Activity Description** RPM Plus will build upon SOPs developed for management of TB commodities in China and explore opportunities to disseminate the SOPs and lessons learned in the process.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | RPM Plus supports WHO's Stop TB Initiative by providing technical assistance through various global, regional and national activities to strengthen TB pharmaceutical management capacity of TB control programs. One activity is to assist the Global TB Drug Facility (GDF) at Stop TB in conducting rapid assessments of the TB pharmaceutical supply system assessing program management, financial management and pharmaceutical management. In May, RPM Plus conducted assessments for both first and second line TB medicines in Mongolia. | | | | |

Last Updated: 07/10/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** TA in National Drug Control**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 60C3H4**Activity Description** Provide technical assistance to the national drug control laboratory of DACA in building the human and managerial capacity and introduce simple drug control procedures for quality testing. Plan for long-term TA through a locally hired quality control pharmacist.e

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

Year 07

Activity Title TA in National Drug Control

**Project
Year 8 Q3**

In this quarter, draft manual on proper storage and handling of drugs at regional and facilities level prepared; draft Laboratory Safety Manual approved and familiarized; Working Group from DACA and MSH established, TOR and work plan prepared, and 20 ARVs, Anti-malarial, Anti TB etc. drugs selected for test. An Internal Quality Audit Group was also formed to follow up the implementation of the quality management in the Lab and assessment made on the current status.

Review workshop to examine the DACA Lab. Quality and Lab. Safety Manuals and SOPs was held in Adama. Participants came from DACA, MSH, Pharmaceutical manufacturers and wholesalers QSAE, Higher educational Inst. etc.. The Manuals and SOPs were reviewed, recommendations for further improvements before final implementation made.

The staffs for the Minilabs were recruited, supplies received but the staff training and opening of the labs was postponed by MSH HQ due to some other arrangement on the issue between MSH and USP DQI

Proposal for the situation analysis study drafted and waiting for final discussion with DACA counterparts for final submission for financial release.

Some implementation activities like forming the safety Committee has started and follow up works are in progress (draft Laboratory Safety Manual) a safety assessment checklist prepared and preparation for

Delay in the training of DACA regional branch staff on the Minilabs and installation of the Minilabs due to frequent postponement of the training by the USP DQI experts expected to come from USA, which created delay of the establishment of the Minilabs as scheduled

Delay in preparing the software for documentation, recordkeeping and inventory control in the Lab. This has also delayed the training of staff on the software.

Delay in recruiting staffs to be trained in the different specialties from the DACA laboratory.

Start actual sampling activities by DACA staffs, MSH RPMAs and Regional Health Departments.

In June training of the MSH RPMAs and actual sample collection will begin.

Hold discussions on sampling with regional focal persons and begin sample collection for test.

Finalizing a comprehensive QA training manual for improving laboratory quality.

Train regional DACA staff and conduct installation of mini-labs in collaboration with USP DQI.

Workplan: Ethiopia COP**Year** 07**Activity Title** TA in National Drug Control

undertaking the assessment is underway

Post Marketing Quality Surveillance Study in collaboration with DACA is in full progress. Already the study drugs are selected, sampling sites identified, actual sample brands selected and sampling centers marked. The necessary list of chemicals/ reagents and glassware prepared and procurement processes initiated. Training to DACA regional branch managers who will be the study focal persons in their respective regions was organized.

SOPs involving unaddressed issues identified in the Quality Manual review meeting were drafted and submitted to the Laboratory management.

Preparation of the Lab. safety assessment checklist completed which enables the assessment activity start.

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** Technical Assistance Coordination (TAC) and Country Office TA/Operation**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 97XXY1/X

Activity Description This activity includes technical activity coordination, work plan development, budget monitoring, progress monitoring, reporting, meetings, and communications with partners and collaborators
The office will represent MSH and will be responsible for interfacing with RPM plus, USAID, CDC and other partners. It will manage funds, recruit staff and consultants and provide technical assistance to stakeholders as needed. It will report on progress and monitor performance.

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

Year 07

Activity Title Technical Assistance Coordination (TAC) and Country Office TA/Operation

**Project
Year 8 Q3**

The Ministry of Health in collaboration with MSH/RPM Plus-SPS and with financial support from USAID launched Fix Dose Combination (FDC) at a workshop. Over 110 health professionals attended the meeting. Immediately after the launch, Antiretroviral Treatment (ART) Adherence baseline assessment dissemination and way forward workshop was held.

MSH/RPM plus participated in the Amhara and Oromia regional HIV AIDS activities planning events for the coming new Ethiopian fiscal year 2001 EC. Regional MSH/RPM Plus - SPS 2001 E.C. action plan were prepared based upon the request made by HAPCO and submitted to both Oromia and Amhara regional HAPCO.

RPMAs at different regions have participated in the national and regional supportive supervision organized by Federal HAPCO team to supervise the overall HIV/AIDS activities in different regions at selected health facilities level, wereda and zonal HAPCO and health offices level, also at regional laboratory level and regional PLWHA Association level, federal team was joined by regional team from different partners including MSH/RPM plus.

Consultative workshop on Modalities of Pharmacy Week Celebration was organized by Ethiopian Pharmaceutical Association (EPA) in collaboration with MSH/RPM Plus/SPS. Pharmacy week offers an opportunity to reflect and refocus on the various and varying aspects of the profession. Pharmacy Week 2008 will be celebrated with the

Some health personnel working in ART pharmacy were not available, some complains about work load and some complains about payment of activities at ART pharmacies.

Delay in action from the stakeholders in reviewing the proposal and giving the go ahead for the data to be collected. Absence of focal person Also created a gap in the progress of the joint activities

Delay in designing and communicating the joint follow up plan affects performance on establishing and strengthening of DTCs,

Continue and actively participate in the Integrated Supportive Supervision (ISS) program with partners organized and led by FHABCO

Follow up on joint work plans developed by RHB, DACA, Regional HABCO, EPA and RPM Plus field staff
Expand and strengthen communication with partners (facilities management, RHB, Zonal HB, Woreda Health Offices, HAPCO and others).
Communicating the Regional and zonal Health Bureau of major activities and achievements of RPM Plus/SPS

Workplan: Ethiopia COP**Year** 07**Activity Title** Technical Assistance Coordination (TAC) and Country Office TA/Operation

theme "Pharmacists and the Public in Harmony for Better Health Care".

RPM Plus , in collaboration with DACA, has provided TA to establish Drug Therapeutic Committee (DTC) at health facilities and as a result 44 DTCs have been established in this quarter, that brings the total number of DTCs to 66. The TA provided to the health facilities includes, sensitization to familiarize DTC and follow up assessment on its establishment.

His Excellency Mr. Donald Yamamoto, US Ambassador to Ethiopia, together with USAID and head of Tigray Regional Health Bureau as well as other partners visited health facilities in the region. He appreciated the tremendous effort MSH exerts to improve the services at the health facilities.

During the reporting period, the country office has received technical assistance visits from headquarters by Douglas Keene, RPM Plus Director, Alan Rogosch, finance and Gabriel Daniel Country Program Manager.

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** TA in Drug Supply Management,**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 60CXH2**Activity Description** Assist in devising and operational zing a system by which ARVs, drugs for OIs, PMTCT products, laboratory reagents and test kits from various sources are stored and distributed to health facilities through a centrally coordinated mechanism.

Assist in the development of a mechanism for product exchange between over- and under-stocked sites to enable sites use the drugs and related products before expiration.

Place pharmacists in all regions and MOH to provide on-site support in quantification, procurement, distribution and inventory control.

TA in PMTCT products procurement including Axios donation application

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

Year 07

Activity Title TA in Drug Supply Management,

**Project
Year 8 Q3**

In the reporting period, a total of 328 ART sites (279 ongoing and 49 new) have received TA from RPM Plus. Compared with the previous quarter the number of ART sites has increased by 17.6%. In June 2008, a total of 112,319 patients were enrolled at all ART sites, more by 13,758 patients or 13.9% as opposed to the previous quarter (March, 2008). Overwhelming majority (95%) were adults and nearly 95% have been enrolled in the government hospitals and health centers.

PMTCT supplies NVP tablet & syrup, NVP syringe and NVP dosing charts were supplied to new PMTCT sites and also to old sites that were having shortages. Furthermore, PMTCT dosing chart was prepared according to the new PMTCT guideline, ZDV dosing chart and NVP dosing charts were given to all ART sites. TA was given on the proper use of the PMTCT supplies especially NVP & ZDV syrups and dosing issues. Reference posters were supplied to ART sites the posters describe summary of the different ART Drugs interaction with other group of drugs, this material could be used for the pharmacy professional to assess the potential drug interaction, contraindication, ... etc. in order to improve the quality of the service & clinical outcomes. During the quarter, a total of 67 health facilities have implemented pull based requisition system.

ARV drugs delivered to all sites; as a result no stock out of ARV drugs was reported. ARV drugs with short shelf-life were redistributed to health facilities

Shortage of pediatric ARVs and at the regional hub and at some ART sites

Delay in the distribution of Pediatrics ARVs to some health centers

Delay of delivery as well as sending of nearly expiry ARV drugs to health facilities by PHARMID

Many emergency ART drug delivery situations in ART sites.

Some OI drug shortages antibiotic and antifungal drugs.

Existence of long standing expired drugs and related products in some facilities and delays due to various reasons for its disposal including lack of clear SOP for disposal of expired drugs

Lack of training for pharmacy professionals at hospitals about pediatrics treatment.

Turnover of staffs working in ART pharmacy, shortage of pharmacy personnel in ART pharmacy and lack of motivation for the ART pharmacy activity leads a gap in the implementation of comprehensive ART service. ART service is seen as an additional task by some professionals.

Delay of procurement of ARVs for PMTCT precludes expansion of

Provision of PMTCT supplies NVP tablet and syrup, NVP syringe and NVP dosing charts as well as reagents to new and existing PMTCT sites

Extend provision of technical and financial support to health facilities to facilitate segregation and disposal of expired drugs and medical supplies

Stock status control system, distribution and redistribution of ARVs will continue

Continuous supportive supervision of ART/PMTCT sites

Workplan: Ethiopia COP**Year** 07**Activity Title** TA in Drug Supply Management,

before they get expired and over stocked drugs are properly transferred between health facilities. During this quarter, 6 and 23 health facilities found to be over and under stocked respectively and 52 stock exchange events were carried out.

the combined ARVs prophylaxis for prevention of MTCT to existing PMTCT sites.

Prepared distribution list of pediatric ART drugs including the new FDCs , the distribution was for 40 health center ART sites in Amhara region upon the request made by the regional health bureau to initiate pediatric ART service at health centers ART sites. The distribution request was sent to Clinton Foundation and SCMS for immediate supply of the drugs to sites).

Refills are delivered to all the hospitals that had shortage of some drugs (3TC syrup, NVP syrup, d4T 40mg tab). First line adult ARVs supplied to Health Centers and emergency supplies of pediatric formulations were delivered to some hospitals.

Segregation and disposal of expired drugs and medical supplies was carried out as part of improving storage system at most of the health facilities.

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** Training, Human Capacity Development and Collaborative Linkages**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 60CXM5**Activity Description** Provide technical assistance in training and provision of reference materials in ARV drug management and ART
Training will focus on pharmacists, physicians, nurses and lab personnel.
Organize and participate in workshops/conferences to share experiences and networking

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

Year 07

Activity Title Training, Human Capacity Development and Collaborative Linkages

**Project
Year 8 Q3**

In the reporting quarter, RPM Plus/SPS in collaboration with Drug Administration and Control Authority (DACA) has organized six training events in two rounds on Good community Pharmacy Practice (GCPP), Drug and Therapeutics Committee (DTC), and Drug Information Service (DIS). A total of 116 professionals participated in the Drug and Therapeutics Committee (DTC), 119 in the Drug Information Center (DIC), and 109 in the GCPP training.

SOP for ARV Drug Management training was given to over 20 data clerks and druggists. Topics covered in this training include the roles of data clerks in ARV's MIS, i.e. ordering, receiving, and dispensing recording and stock monitoring.

RPM Plus/SPS has also organized a one day training to equip its regional pharmaceutical management associates (RPMAs) and other staff on new developments on the topic of Fixed Dose Combination (FDC)

Pre service ART training for graduating pharmacy students from the School of Pharmacy was given at Jimma University. The topics covered in the training were overview of HIV/AIDS in Ethiopia; ARV drugs policy and its implementation status; HIV and Diagnosis of HIV Infection; HIV: stage of disease and initiation of treatment; Clinical pharmacology of antiretroviral therapy; significant drug interactions with ART drugs; women, HIV and ART in pregnancy; ART in children; Prophylaxis and treatment of opportunistic infections; TB and HIV co-infection; adherence to

Lack of refresher training to pharmacy technicians compared to other professionals regarding the new ART guideline, lack of Pediatric ART management training at health centers

Lack of cooperation (ownership problem) from Pharmacy professionals at facility level to implement the planned activities.

Shortage of printed SOP manual

Shortage of professionals at health facilities and unavailability of supporting staff at most of the public health facilities
High attrition rate of professional staff

Continue organizing training events on ARV drug supply management, SOP/MIS, RDU, and on ART storage and good dispensing practice to health professionals, mid-level pharmacy personnel and pharmacists in private pharmacy practice.

Strengthen on-the-job training and mentorship at facility level

Provision of additional pre service ART training for graduating pharmacy students from the Schools of Pharmacy of other universities.

Workplan: Ethiopia COP**Year** 07**Activity Title** Training, Human Capacity Development and Collaborative Linkages

ART and others.

On site trainings for data clerks and health staffs about the use of all MIS tools and SOP were given by MSH/RPM Plus Regional Pharmaceutical Associates

A two days two round of workshops were organized by EPA in collaboration with MSH/RPM plus/SPS on "Familiarizing Pharmaceutical Ethics and Promoting Standard Practice" and conducted at Mekele and Dire Dawa. A total of 113 Participants who were Pharmacists from Tigray, Amhara, Dire Dawa, Harari, Somali and Oromia regions attended these workshops.

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** Renovation and Upgrading**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 60A2H3**Activity Description** Renovate and upgrade pharmacy and laboratory infrastructures as required for secure and safe storage for drugs, supplies and records. (shelving/ lockable cabinets, refrigerators) and provide improved confidential dispensing and counseling booths and incinerators for damaged drug disposal

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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Workplan: Ethiopia COP**Year** 07**Activity Title** Renovation and Upgrading**Project
Year 8 Q3**

During the reporting period, infrastructure upgrading and renovation work was completed at one site and construction work is on progress at 52 new sites. Five renovated ART sites (in A.A, East Shoa, West Hararge, West Gojjam and Dire Dawa) handed over to the concerned authority. In some areas the renovation and expansion work is on its final finishing process (like in Feleghiwot hospital, Bahir Dar health center and Merawi health center. Renovation and store rearrangement activities being done by MSH/RPM plus were appreciated by Federal and Regional HAPCO, regional health bureau and health facilities' official and public at large.

A core component of Rational Pharmaceutical Management Plus (RPM Plus's) work is helping pharmacies to better organize their storage facilities for drug stocks. With technical and financial support, store rearrangement activities have brought about sustainable changes in store conditions and in stock expiry monitoring systems.

The introduction of wooden palettes is also important to improve ventilation, and to prevent moisture from damaging boxes which are stored on the floor. When necessary, air conditioning and ventilation systems are introduced to the store to maintain adequate temperature and humidity.

In this reporting period, different types of supplies (shelves, filing and storage cabinets, and others) have been provided to 26 health facilities and procurement of these supplies is in

Price escalation for building materials & delay in renovation (sometimes wait and see takes time), lack of cooperation from the health Facilities, too many sites being renovated at the same time.

The renovation activity in some facilities is not started due to space problems, delay of management decisions as well as long process to get the desired place from government bodies.

Assigning selected contractors and handing over the selected sites for renovation

Procurement and supply of shelves, pallets and other relevant equipments for stores and dispensary

Address the renovation construction quality and Design problem

Formal handing over of the renovated health facilities

Finalization of list of priority list of health facilities for renovation and assignment of contractors.

Workplan: Ethiopia COP**Year** 07**Activity Title** Renovation and Upgrading

progress. Facilities storage condition and handling of drugs becoming better from day to day even though store rooms in some facilities are very narrow. As a result, storage conditions of 38 health facilities has been improved ,

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Ethiopia COP**Year** 07**Activity Title** Site-Level Drug Data Collection, Reporting and M&E**Activity Manager** Daniel, Gabriel**Activity #** Q3**Task:** A1ET06HIP**Sub-Task:** 60GXH6**Activity Description** Provide TA in Drug Information Management System to track stock level, expiry and use of PMTCT/ART products.
Provide pharmacy-related forms at all ART and PMTCT sites at all times

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

Year 07

Activity Title Site-Level Drug Data Collection, Reporting and M&E

**Project
Year 8 Q3**

During this reporting period, mentoring and supervision was given to 73 health facilities of different regions on how to use ADT (dispensing tool) as well as on job trainings were provided

In this period, 25 computers and 18 backup drives have been distributed to ART sites and telephones and internet services were accessed to 27 and 10 health facilities respectively. The new ADT has been installed at five health facilities in Addis Ababa for the purpose of testing and give some orientation about the edited version of the database. Data validity checking was done for all regions and report prepared based on the validity checking summary and communicated to RPMAs and HFs

Aggregation of data was made at a regional and national level from the collect reports for patients on ART, aggregation by regimen and consumption of drugs as well as stock on hand. Compiled reports were regularly submitted to SCMS.

Technical assistance was provided to data clerks and database problems were sorted out for 107 health facilities.

Necessary recording forms have been delivered to the private pharmacies for recording and reporting of ATRIPLA dispensing and follow up was made to ensure appropriate recording of dispensed of Fixed dose combination drugs.

Different MIS tools have been printed and distributed/refilled to all targeted Health Facilities, Manual inventory

Delay in report preparation and late reporting by some health facilities makes the compilation process of monthly Pharmacy Activity Report and Patient uptake too late and difficult.

Shortage of backup drives cause duplication of work both manual and computerized.

Geographical Location: its hard to collect in person and to give frequent supervision

Inconsistent data when they register to the reporting format

Different and wrong usage of data terminology in the pharmacy as well as the clinic

Increasing lost to follow up patients

Poor awareness of data clerks to fill all information on the registration book as well as in all other formats

Discussing with Data clerks and supporting them to prepare and provide report on time

Supplying computers and backup drives.

Discuss with RPMA and data managers to give an orientation to data clerks or pharmacists on how to register in the reporting format to get the expected data or information

Organize refresher trainings to all the data clerks on data management, ADT tool, Computer handling and usage, and other related issues.

Encourage site level use of data for delivery of service, decision making to improvement quality of care

Recruit and assign additional data managers and data clerks in collaboration with HCSP project to facilities whose patient load is more than 100.

Installation of manual inventory management tools for newly starting ART service sites

Train untrained pharmacy personnel and data clerks

Workplan: Ethiopia COP**Year** 07**Activity Title** Site-Level Drug Data Collection, Reporting and M&E

management tools supplied to 33 ART sites and manual PMIS introduced at 29 new ART sites.

In this quarter, one supportive supervision and monitoring visits was made by senior RPM/SPS team to 9 sites in Oromia and Harari regional states and Dire Dawa Administrative council and field observations were discussed with management and RPM Plus staff based in Addis. Similarly, all the RPMAs have made a total 192 supervisory visits within their respective catchment areas and provided all the required technical and administrative supports to the facilities.

A statistical bulletin for RPM Plus/SPS was prepared and being commented by senior management team. This Statistical bulletin was issued for the first time by the country office to present a summarized statistical data on RPM plus supports in Ethiopia, its activities and outputs since its inception.

RPM Plus had its regular quarterly Review Meeting for two days. During the review project achievements, challenges, lessons and success stories were presented and thoroughly discussed. All RPM Plus staff attended the meeting.

on inventory management tools/ SOPs.

Organize refresher training on inventory management tools/SOP

Continue the distribution of MIS formats for ART/PMTCT service providing sites.

Continue installation of telephone and internet lines.

Last Updated: 07/09/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

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 8 Q3 | RPM Plus and the Director of the NTP agreed that the remaining TA resources should be used for the revision and update of the NTP Standard Operating Procedures. A workshop to draft a final version was scheduled for May 2008. During this quarter the NTP director was replaced. The new authorities did not prioritize this activity in their short-term work plan. RPM Plus will send a technical report summarizing with recommendations to update the SOP. This activity is administratively completed. | No constraints | The activity is completed | | |

Last Updated: 06/18/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Lesotho **Year** 06**Activity Title** Technical Activity Coordination**Activity Manager** Sallet, Jean-Pierre **Activity #** 1 **Task:** A1SL06XXX **Sub-Task:** 97XXY1**Activity Description** This includes technical activity coordination, work plan development and implementation monitoring, budget and progress monitoring, reporting, meetings and communications

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | <p>Suitable office space was located in Maseru and occupation was taken of the premises. Positions for an SPA and IT person for Lesotho were advertised. Work continued on getting MSH registered in Lesotho.</p> <p>The workplan for Lesotho was finalized. The template for the MOU with counterparts in the region was finalized and will be submitted to the Ministry of Health and Social Welfare for Lesotho. The signed workplan will be used to facilitate registration of MSH in Lesotho.</p> <p>A performance review of MSH/SPS activities in Lesotho by the USG team took place in June. Progress of MSH/SPS with planned activities was discussed.</p> <p>Positions for an SPA and IT person for Lesotho were advertised.</p> | <p>Persons applying for the SPA and IT positions reporting difficulty in applying on line. Delays were experienced in the recruitment process.</p> | | | |

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Lesotho**Year** 06**Activity Title** Strengthening pharmaceutical services at the facility level**Activity Manager** Pharasi, Bada**Activity #** 2**Task:** A1SL06XXX**Sub-Task:** 60E3H2**Activity Description** RPM Plus will work with the MOHSW and in collaboration with WHO to review legislation relating to the supply of medicine. Strengthening of legislation will help to ensure that standards for pharmaceutical services are appropriately developed and supportive of the provision of quality pharmaceutical services.**Project
Year 8 Q3**

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| <p>The Joint RPM Plus/SCMS report was finalized and submitted to the relevant MOHSW units (laboratory services and pharmaceutical services) for verification.</p> <p>Assistance was provided in the development and completion of the strategic plan for the Pharmaceutical Department particularly in identifying and incorporating the activities which must be performed. Areas where technical support will be provided by MSH/SPS were identified and included. These areas were included in the workplan which will constitute part of the MOU between MSH/SPS and the Ministry of Health and Social Welfare.</p> <p>The terms of Reference for the Donations Committee were developed. This committee will provide assistance to the Ministry of Health in developing structure and processes for the control and management of donations made to the MOHSW.</p> | <p>Delays occurred in the counterpart incorporating the time lines for the activities in the strategic plan, resulting in delays in finalising the MOU with the MOHSW.</p> | | | |

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Lesotho**Year** 06**Activity Title** Strengthening NDSO information system operations and provide TA**Activity Manager** Sallet, Jean-Pierre**Activity #** 3**Task:** A1SL06XXX**Sub-Task:** 60GXH3**Activity Description** The strategic plan of the NDSO ended in 2006. Upon request of the NDSO, RPM Plus will provide technical assistance in collaboration with the Southern African Human Capacity Development Coalition (SAHCD) partner for the development of the new strategic plan. Also because of previous poor performance in the implementation of the previous strategic plan, it was agreed that RPM Plus will assist in the development of a performance management system that will help in monitoring the implementation of the strategic plan.

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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Project
Year 8 Q3

No progress on this activity was reported during this quarter.

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Lesotho**Year** 06**Activity Title** Provide training to pharmacists, pharmacy technicians and health care professionals at all levels**Activity Manager** Sallet, Jean-Pierre**Activity #** 4**Task:** A1SL06XXX**Sub-Task:** 60CXM4

Activity Description Basic skills in medicine supply management of HIV/AIDS and related diseases such as TB are also required to manage the medicine supply chain for key essential commodities. Under COP05, appropriate training materials were adopted for this purpose. RPM Plus will use these materials to train pharmacists, pharmacy technicians, nurses, and other relevant health care workers. The key objective is to build adequate skills around procurement, storage, distribution and dispensing of medicines, thereby ensuring availability of ARVs and related medicines and commodities at all times.

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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Project
Year 8 Q3

A meeting was held between NDSO management, MSH and USAID representatives to discuss and map the way forward following the failure of Orion@MSH at NDSO. It was decided that an options analysis would be conducted to identify and select the most appropriate information management system. The pilot for the selected system will run concurrently with the existing system until the following stock take to facilitate a smooth transition to the new system following its review. A consultant was engaged to conduct the option analysis. The exercise was conducted and debriefing carried out for the management of NDSO.

A study to determine a mark-up on donated products handled by NDSO commenced in April and was completed. A preliminary report was prepared and submitted to NDSO at the end of June. The report was submitted to stakeholders for comment. The results of the report were used by NDSO to prepare a proposal to the Global Fund for the funding of procurement, storage and distribution costs.

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Lesotho**Year** 06**Activity Title** Rx Solution roll-out in target sites**Activity Manager** Sallet, Jean-Pierre**Activity #** 6**Task:** A1LS06XXX**Sub-Task:** 60CXJ6**Activity Description** Using FY06 funds, RPM Plus will ensure that the tool is continuing to function appropriately at these sites and will be rolled-out to the remaining public ART sites. Special focus will be given to the generation of adequate and timely reports and their submission to the national level for program planning and monitoring. In addition, RPM Plus will explore with the MOHSW the opportunity to roll-out the system in other CHAL facilities.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------|-----------------------------|
| Project Year 8 Q3 | Planning was done for DSM training for members of the District Health Management Teams which will be conducted at the end of July 2008. | Office manager position not filled yet therefore all logistical matters in organizing the training handled by the one SPA who is also conducting the training. | | | |

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Lesotho**Year** 06**Activity Title** Provide TA in pharmaceutical management in support to national,district and/or facility level**Activity Manager** Steel, Gavin**Activity #** 7**Task:** A1LS06XXX**Sub-Task:** 60CXH7**Activity Description** RPM Plus will use FY06to continue to train and provided continuing technical assistance to these PTCs. These committees will play a key role in promoting standard treatment guidelines (e.g HIV and AIDS regimens) and reviewing medicine use practices thus promoting rational medicine use at all levels**Project
Year 8 Q3**

| Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| A meeting was held on the 18th of June with a number of MOHSW units to discuss the re-introduction of RxSolution at four sites. A pilot plan was developed and presented to the Ministry of Health and Social Welfare. The pilot will commence in July. | The services of a full time IT person for the Lesotho SPS office to support the system in-country have not yet been secured. | | | |

Last Updated: 07/15/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**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 |
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| Project Year 8 Q3 | <p>On April 17, 2008 in the Auditorium on Acción Médica Cristiana (Managua, Nicaragua) MSH/RPM Plus presented a summary of the implementation process of the Standardized Manual for the Training of Dispensers and the Quality Assurance Manual and the results of the final evaluations. Pharmacist and authorities of the NGO's sponsoring VSMs, USAID officials, the coordinator of the local MSH project (PRONICASS) and MoH managers participated in the activity. Final versions of all documents were distributed to the participants.</p> <p>This is the last activity programmed in the work plan.</p> | None | Activity is completed | | |

Last Updated: 06/18/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

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 8 Q3 | <p>On April 17, 2008 in the Auditorium on Acción Médica Cristiana (Managua, Nicaragua) MSH/RPM Plus presented a summary of the implementation process of the Standardized Manual for the Training of Dispensers and the Quality Assurance Manual and the results of the final evaluations. Pharmacist and authorities of the NGO's sponsoring VSMs, USAID officials, the coordinator of the local MSH project (PRONICASS) and MoH managers participated in the activity. Final versions of all documents were distributed to the participants.</p> <p>This is the last activity programmed in the work plan.</p> | None | Activity is completed | | |

Last Updated: 06/18/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Rwanda COP**Year** 07**Activity Title** To assist the MOH in building the readiness of District Pharmacies in infrastructures, equipment, and human resources in support to**Activity Manager** Ntumba, Georges**Activity #** 4**Task:** LFRW07HIP**Sub-Task:** 60C4H2**Activity Description** The renovation of the pharmacies will be done observing the norms established by the PTF. In addition SPS will provide support to other partners that have allocated funds for pharmacy renovation in order to ensure that standards are observed. SPS will conduct another training course on Advanced Pharmaceutical Management for the new pharmacists, and will invite any other district pharmacist hired by the MoH or other partners.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | Consistent with moving the rehabilitation process forward, in May 08 tender announcements were published, proposals received from contractors, and evaluations of all received proposal were conducted in the presence of and with the explicit involvement of respective district authorities. SPS is currently in the process of developing contracts with contractors for 9 district. The 10th district is still in the process of identifying a structure to be rehabilitated. SPS anticipates rehabilitation of 5 district pharmacies to begin by the end of July 08. SPS in June 08 convened a panel comprised of TRAC, CAMERWA, CNLS, and PTF to conduct interviews of potential candidates for 8 district pharmacies. The recruitment process is ongoing. Information from the interviews currently being compiled for review and final selection. | *Budgetary constraints; SPS budget at this time will only accommodate the rehabilitation and equipping of 5 instead of 10 district pharmacies. *Given budget constraints, SPS will have to assess its ability to take on the salaries of 8 additional pharmacists for an additional two years | SPS Resident Advisor will convene meeting with PTF and USAID to discuss the situation and explore alternative means by which the additional 5 pharmacies may be covered by other donors. SPS Resident Advisor will convene meeting with PTF and USAID to discuss the way for with respect to take on the salaries of 8 additional pharmacists for an additional two yearsthis matter. | | |

Last Updated: 07/11/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Rwanda COP**Year** 07**Activity Title** To build and strengthen the capacity of the managers of district pharmacies and HIV sites.**Activity Manager** Murekatete, Denise**Activity #** 5**Task:** LFRW07HIP**Sub-Task:** 60CXM3

Activity Description During COP07 SPS will implement the indicator-based Monitoring-Training-Planning (MTP) approach with the pharmacists hired in COP06 to address the most important managerial and technical challenges identified through a base-line assessment. In addition, in collaboration with the PTF, SPS will capacitate the managers of all district pharmacies (whether pharmacists or nurses) to implement formative supervisions and training activities on pharmaceutical management within their districts.

During COP07 SPS will maintain some activities conducted directly at the pharmacies of HIV facilities, to ensure that all pharmacy staff in charge of managing ARVs has participated in the training course Basic Pharmaceutical Management, and are able to use the SOPs developed and revised in past years. SPS will work with each individual district to ensure that the district pharmacist can gradually provide the especial supervision required for the management of ARVs and HIV patients.

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

Year 07

Activity Title To build and strengthen the capacity of the managers of district pharmacies and HIV sites.

**Project
Year 8 Q3**

During Q2 SPS in collaboration with PTF conducted a (phase 1) TOT on reporting tools (i.e. OI, ED, malaria, ARVs, TB, & Labs) from 26th - 28th of February for supporting programs, staff of PNILP, PNILT, NRL, CAMERWA, SCMS, and PTF; phase 2 of the TOT for districts (district pharmacy managers, supervisors of district hospitals, and health directors) was implemented in collaboration with PTF and SCMS from 24th - 28th of March; the training covered all information on existing and new reporting tools developed with PTF and CAMERWA in 2007. During the current reporting period phase 3 of the ongoing training was conducted from 14th - 25th of April at health facility level. A total of 477 individuals from approximately 477 health facilities were trained. PTF in collaboration with SPS determined that training will be carried during Q4 through the formative supervision process. Formative supervision visits to targeted health facilities are scheduled to be conducted the last two weeks of August and the first week of September. The supervision visits will cover a period of approximately three weeks. The supervision will cover all relevant aspects of pharmaceutical management. SPS in collaboration with PTF determined that given the rapid rate of the scaling up of ART sites and the lack of sufficient staff (PTF/SPS), as well as the availability of information from the field, it was determined that there would be a need to change the existing approach typically used to conduct formative supervision. It was decided that a targeted approach would be most appropriate. The staff of SPS and PTF

*The availability of staff of PTF to plan and implement activities
*Increasing number of ART sites and limited number of staff makes it impossible to conduct formative supervisions across the country; a new targeted approach has been adopted in response to current human resource constraints

*Meet with PTF to determine an appropriate time period to conduct additional training at the district level on pharmacy management; a meeting is scheduled with PTF for the second week of July 2008.

*Complete training reports; assist the supporting programs and district level staff in conducting ongoing supervisions at the health facility level. Continue to work in collaboration with the PTF to develop and implement a program of ongoing trainings.
*Meet with PTF to determine an appropriate time period to conduct the targeted trainings; a meeting is scheduled with PTF for the second week of July 2008.
*In collaboration with PTF conduct supervision at the end of August/beginning of September 2008.
*Continue the implementation of each session at six weeks intervals utilizing the district pharmacists as facilitators.

Workplan: Rwanda COP**Year** 07**Activity Title** To build and strengthen the capacity of the managers of district pharmacies and HIV sites.

will utilize existing information received through monthly reports submitted by the ART sites to determine the sites that are most in need of assistance. Formative supervision visits to targeted health facilities are scheduled to be conducted the last two weeks of August and the first week of September. The supervision visits will cover a period of approximately three weeks. During the reporting period SPS conducted the first MTP session (May 08) for all 8 district pharmacists. The session was attended by the head and staff of the PTF. The group finalized a list of topics and dates for the next 8 MTP sessions which will occur every six weeks at the SPS office. The MTP process is extremely participatory. Each session will be conducted by one of the district pharmacists.

Last Updated: 07/14/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Rwanda COP**Year** 07**Activity Title** To integrate and ensure the quality of the existing components of the Pharmaceutical Management Information and Reporting**Activity Manager** Buki, Gege**Activity #** 6**Task:** LFRW07HIP**Sub-Task:** 60AXJ4

Activity Description During COP07 these tools will be implemented through a cascade training-supervision intervention, in collaboration with other clinical partners and SCMS. At central level, SPS will support the PTF to establish a data management unit to capture and analyze the data submitted by the district pharmacies every quarter. In addition, SPS has implemented the ITT in 8 district pharmacies to collect and manage consumption and distribution data of the districts. The tool will be implemented in COP07 to the rest of the district pharmacies as well as in selected district hospitals.

| | Activity Progress | Barriers to Progress | Next Steps | Products Planned | Progress on Products |
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| Project Year 8 Q3 | During the reporting period SPS facilitated the printing of several tools to ensure the availability of the tools and the maintenance of existing report systems; OIs Tool/Instructions were printed by SPS. SPS sponsored the printing of tools/instructions which comprise the reporting system required to ensure the implementation of active distribution; printing of tools for essential medicines will be finalized the second week of July 08. In addition, RPM Plus/SPS continued to provide TA and support to 8 district pharmacies where the Inventory Tracking Tool (ITT) was installed and is being piloted. SPS continues to reach out to sites where the Dispensing Tool (DT) have been installed; SOPs for health facilities have been finalized and will be packaged and disseminated during Q4. | Difficulties with supporting ART sites where the DT have been installed; issues includes: high turnover of staff, lack of computers, and lack of motivation of available staff | SPS is currently developing a strategic plan to address the issue related to non use or lack of appropriate functioning of DT in sites where it has been installed; the plan will include criteria for identification of additional sites for the installation of the tool; work with TRAC to disseminate SOPs for health facilities. | | |

Last Updated: 07/14/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Rwanda COP**Year** 07**Activity Title** To provide managerial and technical assistance to the PTF in line with the requirements to decentralize pharmaceutical management**Activity Manager** Hitayezu, Felix**Activity #** 7**Task:** LFRW07HIP**Sub-Task:** 60AXH5

Activity Description During COP07 SPS will provide assistance to the PTF in two key elements that are needed to effectively implement the decentralized system and the active distribution from the central level to the districts. These are the development of a Medicines Pricing Policy, and the national guidelines for the Procurement and Distribution of Essential Medicines. With the decentralization policy SPS will provide before the decentralization policy, the supply of medicines in the country was done in an ad-hoc manner. The PTF has also requested SPS to maintain the support for the implementation of the NDA, as far as the government of Rwanda approves its establishment. According to the evolution of the situation, SPS will engage a consultant to guide the MoH in the first stages of implementation of the NDA

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

Year 07

Activity Title To provide managerial and technical assistance to the PTF in line with the requirements to decentralize pharmaceutical management

**Project
Year 8 Q3**

SPS as provided TA to the MOH for the drafting of policies for the National Drug Authority which includes the registration system; currently the issue remains before the parliament for approval. During the previous reporting period SPS with PTF developed TOR for the prospective consultant needed to assist PTF in the development and implementation of the National Pharmaceutical Pricing Policy; due to difficulties involved in identifying an appropriate consultant, PTF has abandoned this activity and funds are being utilized to print tools for EDs. SPS assisted the PTF and the NMCP with the engagement of a consultant to assist the government of Rwanda (GOR) with beginning the process necessary to develop a national plan of action for the establishment of a Pharmacovigilance (PV) system. The consultant Dr. Jean Rene of Madagascar conducted a workshop on PV from the 21st-23rd of May. The workshop was attended by all public health programs (TB, Malaria, HIV, etc...) and provided the opportunity for the development of a 1 year plan of action which will facilitate the process to begin the establishment of an effective PV system in Rwanda. As an initial step in support of the strengthening of management systems and institutional capacity of PTF, at the request of the PTF, SPS facilitated minor renovations of an existing space to better allow the PTF to have an infrastructure and space from which to administer its responsibilities. SPS sponsored the participation of PTF Coordinator, Viateur Mutanguha in the 5th Regional Pharmaceutical Forum on AMR held in Kampala, Uganda from the 28th of April

*The approval process
 *The PTF has abandoned this activity in favor of utilizing the funds for reproduction of tools for Eds.
 *Lack of an NDA; however, the PTF will assume the responsibility for the coordination of activities for establishment of a PV system; determine the appropriate entry point to begin the system in Rwanda; availability of program staff
 *Delays in the availability of standards from MOH
 *PTF readiness for further discussion

*Once approved SPS will assist the PTF with a plan for the operationalization and implementation the National Drug Registration System
 *SPS will utilize funds for the the reproduction of essential tools at the request of the PTF.
 *Assist the PTF with the finalization of a concept paper articulating a frame for a national PV system, in which the NMCP will be the starting point for the development of an ADR surveillance system; finalize the report from PV workshop and begin the process of identifying with the PTF and other stakeholder key activities from action plan for implementation for Q4.
 *SPS will continue to meet with the PTF to develop a joint plan of action detailing activities that will strengthen and build the capacity of PTF and its staff
 *Follow up with MOH/PTF on the plan and strategy for the next steps adopted during the workshop; finalization of the tools; development of the manual; organize TOT, etc...
 *Final edited version of the document will be shared with PTF; in addition, SPS will develop with PTF a plan for printing and

Workplan: Rwanda COP**Year** 07**Activity Title** To provide managerial and technical assistance to the PTF in line with the requirements to decentralize pharmaceutical management

to the 1st of May 2008. After the workshop on development or adoption of the tools of the integrated supportive supervision the MOH requested that RPM Plus/SPS await the development of standards for all the levels of health structures of Rwanda. SPS with PTF completed the modules for the trainings on Pharmaceutical Management (Basic & Advance); SPS completed the hiring process for the engagement of an Information Systems Assistant for the PTF; the staff began work on the 4th of March. SPS developed and implemented a 2 month orientation process for the staff who spent this orientation period with SPS to ensure appropriate transfer of knowledge and skills in all necessary areas. As of the 1st of June the staff has been based at PTF and is functioning appropriately. The PTF continues to indicate that needs to address a few internal issues prior to discussing this matter further with SPS.

dissemination
*Continue to provide TA and support to the staff.
*Meet with PTF to determine the plan and next steps

Last Updated: 07/14/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3**Workplan:** Rwanda COP**Year** 07**Activity Title** To promote Rational Drug Use in the public and private sectors through existing Rwandan institutions**Activity Manager** Hitayezu, Felix**Activity #** 8**Task:** LFRW07HIP**Sub-Task:** 60EXH6

Activity Description During 2007, SPS will start the measure the impact of the implementation of some adherence-related activities in selected sites. New activities for COP07 included to provide support to the University of Butare to revise the Pharmaceutical Management module that is given to last-year pharmacy students. SPS will continue to collaborate with the Pharmacy Association (ARPHA) and with RAMA (mutuelles de sante) in training activities aiming to increase the capacities and skills of the pharmacist working in the private sector in regards to counseling, good dispensing practices and rational medicines use.

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

Year 07

Activity Title To promote Rational Drug Use in the public and private sectors through existing Rwandan institutions

**Project
Year 8 Q3**

During the reporting period SPS supported the establishment of 2 new DTCs (Kabutare & Nyanza Hospitals).SPS continues to provide ongoing TA and support to the 8 existing DTCs. During Q2, SPS in collaboration with PTF revised the TOR for NDTC and final draft was submitted to PTF for review; SPS continues to await PTF's review and approval of the TOR.SPS in collaboration with PTF and ARPHA developed a series of RDU educational articles to be published in local newspapers; the first of the articles will be published during Q4. In addition, PTF, SPS, and ARPHA will participate in a series of radio forums to provide information on RDU to health professionals and the general public at large. The forums will occur during Q4. In addition, pharmacists of ARPHA will be participating in the implementation of SPS' ACT compliance activity scheduled to take place in July 08. The pharmacists will function as data collectors and supervisors of the compliance survey process.SPS has already reached out to both PTF and RAMA regarding the need to still a strategic plan of action to operationalize this particular activity.Unfortunately, previously arranged appointment between all three parties were not kept due to scheduling conflicts. SPS is expected to assist RAMA with the provision of pharmaceutical management training for its staff (pharmacists) during Q4.SPS finally received a copy of the curriculum and will begin the process during Q4 of reviewing the curriculum and making recommendations for the appropriate inclusion and integration of

*Motivation on the part of hospital administration and staff for the establishment and maintenance of DTCs; lack of incentives for DTC members.
*Lack of availability of all parties; scheduling conflicts

*Work with PTF to identify and select additional hospitals for the expansion of DTCs; continue to provide TA and support to existing 8 DTCs
*Continue to work very closely with PTF and ARPHA for the development and diffusion onf educational information on RDU to health professionals and the general public at large.
*Meet with PTF and RAMA to establish a strategic plan of action and ensure harmonization between work plans.
* Review academic curriculum and provide recommendations for the integration and inclusion of pharmaceutical management and RDU elements into the curriculum. Work closely with the NUR.*Meet with PTF and NUR to establish a strategic plan of action and ensure harmonization between work plans

Workplan: Rwanda COP**Year** 07**Activity Title** To promote Rational Drug Use in the public and private sectors through existing Rwandan institutions

pharmaceutical and RDU elements into the curriculum. This process will be carried out very closely with representatives of the NUR. Due to the lack of availability of the appropriate individuals from the NUR, RPM Plus/SPS and PTF have not yet had the opportunity to meet as a group to establish a join plan of action.

Last Updated: 07/14/2008

RPM Plus Activity and Product Status Report**Selection Criteria:** Reporting Year = Project Year 8 AND Reporting Quarter = Q3

Workplan: Rwanda COP**Year** 07**Activity Title** To strengthen the CPDS and its technical committees as part of the pharmaceutical system for HIV and other programs.**Activity Manager** Kabuya-Mutshipayi, Willy**Activity #** 9**Task:** LFRW07HIP**Sub-Task:** 60CXH7**Activity Description** SPS will provide technical support to the coordinator in the process of reviewing and revising the governance framework in any other aspect needed.

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

Year 07

Activity Title To strengthen the CPDS and its technical committees as part of the pharmaceutical system for HIV and other programs.

**Project
Year 8 Q3**

SPS continues to take its lead from the CPDS Coordinator with respect to the level and types of TA and support that is needed and rendered. The CPDS Coordinator with TA from SPS determined the aspects of the CPDS Governance Framework that required revision; as part of the plan for revision, the CPDS Coordinator developed proposed framework for the process to revise the document. The CPDS Coordinator presented the proposal to the Permanent Secretary (PS) and is awaiting approval from the PS; the PS already appointed a committee to work on the revision. During the previous reporting period, CPDS Coordinator in collaboration with SPS convened a meeting from the 18th - 19th of March comprised of various stakeholders/partners of the technical committees of the CPDS, as well as partners who render TA to the CPDS; purpose of the meeting was to develop an annual plan of action for the CPDS. The CPDS Coordinator submitted monthly reports to the PS of activities carried out during the reporting month and activities scheduled for the following month. As of Nov 07 (Q1) SPS effectively transferred its technical responsibility in support of the quantification to SCMS; SPS will continue to participate in the quantification process as a member of the Quantification Committee of the CPDS. SPS provided TA with required modification to the Inventory Tracking Tool (ITT) at CAMERWA. SPS continued weekly technical supervision of the new data manager at CAMERWA. SPS awaits an invitation from TRAC; SPS will be available upon request to render TA

*Convincing the appropriate staff of the MOH of the importance of formally integrating the CPDS into its formal structure
*Delays on the part of CAMERWA in the production of quarterly CPDS reports

*Continue to meet on a weekly basis with the coordinator and render assistance as mutually identified by the coordinator and SPS
*SPS will meet with the coordinator to determine the status of the revisions and determine and render any needed TA
*Continue to discuss with the coordinator ways in which SPS can support the institutional building of the CPDS on an ongoing basis
*SPS will continue to participate in all aspects of the quantification process as a member of the Quantification Committee of the CPDS; however, SCMS will be responsible for following and supporting all aspects of the quantification process.
*SPS will continue to render TA and support to CAMERWA in its capacity as chair of the Implementation Committee; SPS will continue weekly technical supervision of data manager and analysis activities at CAMERWA
*SPS will await request from TRAC and proceed accordingly with the rendering of TA
*Finalization of the data validation analysis report. Going forward this activity will be supported solely by

Workplan: Rwanda COP**Year** 07**Activity Title** To strengthen the CPDS and its technical committees as part of the pharmaceutical system for HIV and other programs.

in this regard. In November 07, RPM Plus/SPS in collaboration with the CPDS Coordinator, and TRAC organized and executed a data validation exercise at selected ART sites in preparation of the 6th CPDS Quantification exercise; analysis of the exercise has been presented to the Quantification Committee of the CPDS; further data validation will be carried out with TA and support of SCMS, as SPS (as of Nov 07 - Q1) has effectively transferred its responsibility and support of the quantification process for the CPDS to SCMS. SPS has provided CAMERWA needed TA to complete the required CPDS semi-annual report covering the period June-Dec 07. SPS rendering assistance to CAMERWA and the CPDS for the completion of quarterly reports for 2008. TA and support in this require as been hampered by lack of consistency from with respect to the availability of staff and information for the production of the report.

SCMS.

*Continue to provide TA and support to CAMERWA for the timely completion and dissemination of quarterly CPDS reports; assist the CPDS Coordinator with effectively coordinating the timely production of the reports

Last Updated: 07/14/2008
