

**Rational Pharmaceutical Management Plus  
Capacity Building—Drug Management Team of the Institute of  
Phthisiopneumology: Trip Report**

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Robert Burn

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### **About RPM Plus**

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

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### **Abstract**

Tuberculosis is a growing health issue in Eastern Europe and an inexpensive and effective treatment regimen exists promulgated by World Health Organization. The United States Agency for International Development is funding Rational Pharmaceutical Management Plus (RPM Plus) to strengthen the drug management aspects of national tuberculosis control programs (NTP). Since assessing drug management information needs for program managers of the Moldova national tuberculosis program in 2002, RPM Plus has been strengthening data collection and analysis practices. A set of drug management indicators was established to facilitate monitoring of the supply system, a sub-set of which are being incorporated into the monitoring and evaluation system of the Ministry of Health (MOH). In 2004, RPM Plus initiated technical assistance in pharmaceutical management for 2<sup>nd</sup>-line drugs, to complement the MOH's application to the Green Light Committee for support with the implementation of a DOTS Plus program to treat multi-drug resistant tuberculosis (MDR-TB) patients. This assistance includes the development with the NTP of a patient package distribution mechanism for MDR-TB cases, in order to ensure effective inventory control and use of 2<sup>nd</sup>-line anti-TB medicines. Recognizing the need to upgrade the capacity of the Institute of Phthisiopneumology to manage all aspects of drug supply for DOTS and DOTS Plus projects, the Head of the Institute established a *Drug Management Team*.

### **Recommended Citation**

Burn, Robert 2005 *Capacity Building—Drug Management Team of the Institute of Phthisiopneumology* Submitted to the U.S. Agency for International Development by the Rational Pharmaceutical Management Plus Program. Arlington, VA: Management Sciences for Health.

### **Key Words**

Tuberculosis, national tuberculosis program, tuberculosis drugs, drug management team, management, Moldova.

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## ACRONYMS

DOTS	Directly Observed Therapy Short-course (WHO TB Control Strategy)
DOTS Plus	WHO Strategy for multi-drug resistant tuberculosis
DMT	Drug Management Team
E&E	Europe and Eurasia (Bureau of USAID)
GFATM	The Global Fund to Fight AIDS, Tuberculosis & Malaria
GLC	Green Light Committee
M&E	Monitoring and Evaluation
MDR-TB	Multi-Drug Resistant Tuberculosis
MOH	Ministry of Health of Moldova
MSH	Management Sciences for Health
NGO	Non-governmental Organization
NTP	National Tuberculosis Program of Moldova
RPM Plus	Rational Pharmaceutical Management Plus Program [MSH]
SPCPHSM	Scientific Practical Center of Public Health and Sanitary Management
TB	Tuberculosis
USAID	United States Agency for International Development
WHO	World Health Organization



## **BACKGROUND**

Moldova has one of the highest rates of tuberculosis (TB) within the former Republics of the USSR. With assistance from the World Health Organization (WHO), the Stop TB Partnership and USAID, the Ministry of Health (MOH) established a DOTS program in 2002 which covered the whole country by early 2004. In July 2004, the Ministry of Health applied to the Green Light Committee (GLC) of the WHO for support for a DOTS Plus project to treat multi-drug resistant TB cases. The DOTS Plus project was approved in February 2005, and the NTP has initiated the direct procurement process with the International Dispensary Association (IDA), the GLC's procurement partner, in order to start a new cohort of patients on 2<sup>nd</sup>-line treatment in the second half of the year.

The MOH's application to the GLC incorporated the introduction of a patient package system for the distribution of anti-TB drugs, designed to result in a secure, reliable and centrally controlled procedure for the distribution of 2<sup>nd</sup>-line drugs to patients during the lengthy, out-patient, continuation phase of MDR-TB treatment. RPM Plus and the NTP and the MDR-TB department, both located within the National Institute of Phthiopneumology in Chisinau, are developing the operational requirements for this system in preparation for the implementation of the DOTS Plus project.

Moldova is also transitioning from full support from the Global Drug Facility in the form of first-line anti-TB medicines to locally financed and managed procurement.

With support from RPM Plus, a Drug Management Team was established in April 2005 within the National Institute of Phthiopneumology, to coordinate and manage all the medicine supply activities of the NTP.

### **Purpose of Trip**

MSH/RPM Plus Senior Program Associate Robert Burn visited Chisinau, Moldova from July 4-12, 2005 to provide technical assistance in drug management for the DOTS Plus and DOTS projects in the areas of quantification, procurement, management information, and distribution.

### **Scope of Work**

- With the Drug Management Team and the RPM Plus local consultant review and finalize the guidelines, detailed operational instructions, and data collection and reporting forms for the patient package drug management system for MDR-TB cases.
- Evaluate training needs for the introduction and implementation of this system.

- Formulate proposals for distinct support activities in conjunction with counterparts
- Brief/debrief the USAID Mission on the RPM Plus Program activities in Moldova

## **ACTIVITIES**

1. With the Drug Management Team and the RPM Plus local consultant review and finalize the guidelines, detailed operational instructions, and data collection and reporting forms for the patient package drug management system for MDR-TB cases.

On 7<sup>th</sup> July five members of the DMT and RPM Plus met to discuss the draft guidelines and instructions for the patient package scheme (see page 12 for the list of DMT members who attended the meeting). The unofficial agenda for the meeting contained the following topics:

- RPM Plus technical assistance  
The DMT were given an overview of the RPM Plus, its role and focus in Moldova, and an outline of the kind of support that could be provided.
- Terms of Reference of DMT  
The members of the team recognized the importance of drug management (suggesting that there should be an individual within the Monitoring and Evaluation Department charged with this responsibility) and of communication and information sharing.
- Resolution of queries on patient package scheme  
A number of specific questions prepared by Ms. Seicas regarding the draft guidelines for the scheme were discussed and resolved. The issue of unused drugs, for example because of death or discontinuation of treatment, and whether they could be returned to the pharmacy and reissued needs further consideration. How the patient package would be handled when the patient was under the care of a family doctor (say in the rural area) but supported by the rayon TB physician also requires further attention.
- Team building workshop  
RPM Plus outline a proposal to hold a workshop to introduce the team members to the concepts of team work, efficient professional relationships and a team approach to problem-solving. Everyone agreed to participate and, with August being a vacation period, the availability of the group to attend at the end of July or early in September was discussed.
- Scheduling of workshop for implementation of patient package scheme  
The 2<sup>nd</sup>line drugs procured through the GLC mechanism are expected to arrive sometime in September. Training on the patient package implementation should take place before delivery, if possible, and early September was proposed as the most appropriate time for this activity.

2. Evaluate training needs for the introduction and implementation of this system.

Preliminary steps were taken to identify the group of staff requiring training (both centrally at the Institute of Phthisiopneumology and within the municipality of

Chisinau where the first cohort of patients are likely to be selected from, and at the rayon level) and to assess the duration, material needs and scheduling for a training workshop.

3. Formulate proposals for distinct support activities in conjunction with counterparts

RPM Plus Senior Program Associate, Robert Burn and MSH/RPM Plus consultant, Rita Seicas met with Dr. Silviu Sofronie, Head of the Institute of Phthisiopneumology, and Dr. Dumitru Sain, Manager of the National Tuberculosis Control Program to discuss progress on planned activities, the current institutional environment and next steps.

The RPM Plus team described the current status of the planned patient package scheme for the distribution of 2<sup>nd</sup>-line pharmaceuticals for MDR-TB patients in the intensive and the ambulatory phases of treatment. A full description of the scheme and a set of implementation guidelines had been prepared and shared with members of the Drug Management Team (DMT) of the Institute. Once the instructions were finalized, after further consultation with the DMT, RPM Plus offered to provide a short training course for staff involved in the implementation of the scheme. The printing of the guidelines would be financed by RPM Plus.

RPM Plus reiterated its aim of supporting the nascent DMT and proposed that team members attend a one or two-day workshop aimed at sensitizing the members to the dynamics and mechanics of team work. It was agreed that RPM Plus would identify a local management training organization to provide such a workshop and schedule this, if possible by the end of the month (of July) or early September (the majority of staff take vacations in August in Moldova).

During the previous visit to Moldova the RPM Plus team had collated and analyzed information from the rayon quarterly reports on anti-TB drug distribution, use and stocks. This analysis had raised concerns about the reliability of the reported data and identified areas where monitoring could be strengthened, through the use of computerized practices, to improve decision-making on the distribution of anti-TB drugs to rayon TB hospitals and cabinets. RPM Plus proposed to work further with the Monitoring and Evaluation Department of the Institute on this issue.

Dr. Sofronie appreciated these areas of assistance. He also commented that the patient package scheme might necessitate additional staffing at the Institute pharmacy. Dr. Sofronie informed RPM Plus about the GFATM Project incentive scheme which provides a food and hygiene package to patients in the ambulatory phase. The distribution of the incentives is being managed by NGOs through the primary health centres.

Dr. Sofronie also informed RPM Plus about the possible reorganization of the NTP, by bringing TB doctors under central administration (for recruitment, reporting, salary, etc). TB doctors currently receive 10-20% for identifying and treating TB cases.

4. Brief/debrief the USAID Mission on the RPM Plus Program activities in Moldova

Senior Program Associate, Robert Burn and MSH/RPM Plus consultant, Rita Seicas, debriefed Diana Cazacu of the USAID Mission in Moldova on progress with current activities (as summarized above) and plans for the future.

Ms. Cazacu requested information on the expected burn rate of the funds provided by the Mission (a preliminary estimate was provided by e-mail later that day).

### **Collaborators and Partners**

Institute of Phthisiopneumology:

Dr. Silviu Sofronie, Head, Institute of Phthisiopneumology

Dr. Dumitru Sain, Manager National Tuberculosis Control Program

Drug Management Team:

Dr. Ecaterina Axenti, Monitoring and Evaluation Department

Dr. Tatiana Verdes, Deputy Chief MDR-TB Department

Dr. Rodica Ciocanu, Monitoring and Evaluation Department

Ms. Angelina Djugstran, Chief Pharmacist

Ms. Rita Seicas, MSH/RPM Plus consultant

### **Adjustments to Planned Activities and/or Additional Activities**

1. The RPM Plus team attended a meeting at the Scientific Practical Center for Public Health and Sanitary Management at which the software company, "Q-System", presented the latest version of the computer program designed for the management of health information (SYMERTA). The program incorporated a set of drug management indicators for the performance of the national tuberculosis control program developed by the NTP and RPM Plus. The aim is to commence testing SYMERTA in mid July. Trainings were planned for hospital staff and for the rayon level member of the Organisation-Method Department.
2. Ms. Seicas contacted local organizations to enquire about team building curricula and availability to offer a workshop on this subject during July and

August. One company was identified which had experience in offering such workshops.

## **NEXT STEPS**

### **Immediate Follow-up Activities**

Confirm the availability of (1) members of the Drug Management Team and (2) facilitators from the management training company to attend and facilitate, respectively a workshop on the theme of Efficient Team Work.

If a suitable date in July is identified, arrange a contract with the training company, organize a venue at which to hold the workshop, prepare a budget, and invite the members of the DMT.

Identify a TB doctor from the rayon level to join the DMT and contribute to the deliberations of the team from a de-centralized perspective.

### **Agreement or Understandings with Counterparts**

All members of the DMT would attend the capacity-building workshop later in the month.

### **Important Upcoming Activities or Benchmarks in Program**

Hold team building workshop for members of the Drug Management Team at the Institute of Phthisiopneumology.

Completion of the guidelines and instructions on the implementation procedures for the planned patient package distribution scheme for the 2<sup>nd</sup>-line pharmaceuticals used in the treatment of MDR-TB cases.



## **ANNEX 1: REQUEST FOR COUNTRY CLEARANCE**

**TO:** Vasile Filatov, USAID/Moldova

**FROM:** Management Sciences for Health (MSH) Rational Pharmaceutical Management Plus (RPM Plus) Program

**SUBJECT:** Travel of MSH/RPM Plus Senior Program Associate Robert Burn to Chisinau, Moldova from July 4-12, 2005. RPM Plus Cooperative Agreement No.: HRN-A-00-00-00016-00

**COPY:** Anthony Boni/ Global HSPR/CTO RPM Plus  
Kama Garrison/ USAID Washington  
Delna Gandhi/ USAID E&E Bureau  
D'Arcy Richardson/ USAID E&E Bureau  
Veronica Mihailiuc, USAID/Moldova  
Diana Cazacu, USAID/Moldova  
Mark Levinson, USAID/Moldova  
Olena Radziyevska, USAID/Ukraine  
Douglas Keene, Director, MSH/RPM Plus Program  
Maria Miralles, Deputy Director, MSH/RPM Plus Program  
Andrey Zagorskiy, Project Manager for TB, MSH/RPM Plus Program  
Robert Burn, Senior Program Associate, MSH/RPM Plus Program

1. The RPM Plus Program requests country clearance for MSH/RPM Plus Senior Program Associate Robert Burn to Chisinau, Moldova from July 4-12, 2005.
2. Background:

Moldova has one of the highest rates of tuberculosis (TB) within the former Republics of the USSR. With assistance from the World Health Organization (WHO), the Stop TB Initiative and USAID, the Ministry of Health (MOH) established a DOTS program in 2002 and in July 2004, the Ministry of Health applied to the Green Light Committee (GLC) of the WHO for support for a DOTS Plus project to treat multi-drug resistant TB cases. The DOTS Plus project was approved in March 2005, and the NTP has initiated the direct procurement process with the International Dispensary Association (IDA), the GLC's procurement partner, in order to start a new cohort of patients on 2<sup>nd</sup>-line treatment in the second half of the year.

The MOH's application to the GLC incorporated the introduction of a patient package system for the distribution of anti-TB drugs, designed to result in a

secure, reliable and centrally controlled procedure for the distribution of 2<sup>nd</sup>-line drugs to patients during the lengthy, out-patient, continuation phase of MDR-TB treatment. RPM Plus and the central unit of the NTP and the MDR-TB department, both located within the National Institute of Phthisiopulmonology in Chisinau, are developing the operational requirements for this system in preparation for the implementation of the DOTS Plus project.

Moldova is also transitioning from full support from the GDF in the form of first-line anti-TB medicines to locally financed and managed procurement.

With support from RPM Plus, a Drug Management Team was established in April 2005 within the National Institute of Phthisiopulmonology, to coordinate and manage all the medicine supply activities of the NTP.

3. Purpose of Proposed Visit:

Technical assistance in drug management for the DOTS Plus and DOTS projects in the areas of quantification, procurement, management information, and distribution.

4. Scope of work for Robert Burn for this visit is as follows:

For the RPM Plus/Moldova program:

- With the Drug Management Team and the RPM Plus local consultant review and finalize the guidelines, detailed operational instructions, and data collection and reporting forms for the patient package drug management system for MDR-TB cases.
- Evaluate training needs for the introduction and implementation of this system.
- Formulate proposals for distinct support activities in conjunction with counterparts
- Brief/debrief the USAID Mission on the RPM Plus Program activities in Moldova

5. Anticipated contacts:

Dr. Sofroni, (National Institute of Phthisiopneumology); Dr. Sain, (National TB Program) and members of the Drug Management Team; Mr. Vasile Filatov (USAID/Moldova); Dr. Turcanu, First Vice Minister and other officials and specialists from the Moldovan Ministry of Health; Ms. Rita Seicas, MSH consultant.

6. Logistics:

Robert Burn will arrive in Chisinau on Monday, July 4, 2005 and depart Moldova on Saturday, July 9, 2005. No Mission assistance is required.

7. Funding:

The in-country RPM Plus work will be paid for with USAID/Moldova Mission and E&E Regional funds.

8. Action:

Please advise Anthony Boni of country clearance for Robert Burn to travel to Moldova as planned. Please reply via e-mail to the attention of Anthony Boni, USAID/G/PHN/HN/HPSR tel. (202) 712-4789, fax (202) 216-3702, e-mail address [aboni@usaid.gov](mailto:aboni@usaid.gov). Please send carbon copies to Kama Garrison at [kgarrison@usaid.gov](mailto:kgarrison@usaid.gov), Andrey Zagorskiy at [azagorskiy@msh.org](mailto:azagorskiy@msh.org), Robert Burn at [rburn@msh.org](mailto:rburn@msh.org), Douglas Keene at [dkeene@msh.org](mailto:dkeene@msh.org) and Meriel Jimenez at [mjimenez@msh.org](mailto:mjimenez@msh.org).

Thank you in advance for Mission cooperation.



## **ANNEX 2. MEMBERSHIP OF THE DRUG MANAGEMENT TEAM**

Dr. D. Sain—coordinator National Tuberculosis Control Programme,  
Dr. Alina Pascaru—chief of the Drug Management Team and Monitoring and  
Evaluation Department,  
Dr. Ecaterina Axentii—Monitoring and Evaluation Department,  
Ms. Anghelina Djugostran—chief, Hospital Pharmacy,  
Dr. Tatiana Verdes—MDR TB Department,  
Dr. Felicia Lupacescu—Organisation-Method Department,  
Dr. Rodica Ciocanu—Monitoring and Evaluation Department,  
Dr. Gheorghe Damaschin—TB doctor, Straseni rayon,  
Dr. Elvira Velixar—Institute of Phthisiopneumology



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