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(BLC)

SCMS

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Enhancing the Capacity of Namibia's CMS Staff in Pharmaceutical Warehousing and Distribution

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UPCOMING ACTIVITIES (JANUARY - FEBRUARY 2015)

- Technical assistance to the MoHSS in analyzing trends in HIV drug resistance early warning indicators (HIV-DR EWIs) for the pediatric population
- Supporting the CMS to motivate for a Logistics Management Unit to lead quantification of ARVs
- Strengthening Therapeutics Committees to conduct medicines use evaluations for improving quality of ART services
- Collaborating with the MoHSS to conduct the 2015 annual support supervisory visits for improving ART service delivery in public facilities
- Supporting the MoHSS central medical store (CMS) on pharmaceutical supplier performance monitoring to improve medicines availability
- Technical assistance for revision of the health facility pharmaceutical supplies order books
- Technical assistance to enhance the capacity of TONATA (a local network of PLWHA) for sustained HIV epidemic control



Ms Swita Grobbelaar (standing), a trainer from Imperial Health Sciences, an SCMS partner, facilitates a classroom training session on good warehousing and distribution practices during a training workshop for CMS staff held in November 2014 in Windhoek. Picture by MSH / Namibia staff.

Supply Chain Management System (SCMS), with funding from USAID, trained 40 Central Medical Store (CMS) staff on standard operating procedures (SOPs) for warehousing and distribution as part of the supply chain performance improvement (SCPI) program in Namibia.

CMS procures and distributes all pharmaceuticals and clinical supplies directly to 45 public health facilities on a six-weekly cycle, including two regional medical depots and 26 of the 34 hospitals countrywide.

The SCPI is part of several supply chain workforce strengthening interventions being undertaken in collaboration with the *People-that-Deliver* initiative in Namibia. The CMS training followed the development of new quality management system documentation and occupational health and safety SOPs, and the revision of existing operational SOPs and job descriptions by SCMS in July 2014.

Imperial Health Sciences (IHS), an SCMS partner, offered the SCPI program. The program was designed by specialists with in-depth field experience in warehousing and distribution based on ISO-accredited best practices. The training included both classroom and practical learning sessions within the warehouse, helping to reinforce the theory.

The first week of the training targeted supervisory staff comprising pharmacists,

pharmacist assistants and warehouse clerks (administrative officers) to review and validate all the new and revised SOPs. The second week of the training incorporated all staff including workhands to emphasize on adherence to operational procedures and good pharmaceutical warehousing and distribution practices.

The training also incorporated a site visit to a private sector warehouse which exposed CMS staff to some best practices in warehouse operations especially on orderly arrangement of stock, housekeeping and security.

Since 2003, CMS has registered a more than 300 percent increase in the value of products procured, largely driven by the scale-up of antiretroviral treatment (ART) services to meet the needs of people living with HIV and AIDS.

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The editorial team wishes a happy and prosperous 2015 to all our esteemed readers.



Improving OVC Service Delivery by Building the Capacity of CSOs: CAFO's Experience

In March 2014, the USAID-funded Building Local Capacity (BLC) project through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), began a partnership with the Church Alliance for Orphans (CAFO), a faith-based organization founded in 2003, to respond to the needs of orphans and vulnerable children (OVC) affected by HIV and AIDS in Namibia.

With BLC support, CAFO partners with local communities to:

- Support programs for OVC at 137 early childhood development (ECD) centers serving 6,230 children less than nine years old
- Provide social behavior change communication (SBCC) interventions to 1,597 youth between 10-14 years old for HIV prevention
- Develop skills in OVC care of 254 ECD caregivers and 52 SBCC volunteers

With BLC support, CAFO's Monitoring and Evaluation Officer, Emilia Haimbili, and Chief of Party, Laura Cronje, attended the BLC regional symposium from November 4 - 5, 2014 in Pretoria on "The role of capacity building in enhancing the response of civil society organizations (CSOs) to HIV & AIDS and TB: The experience of BLC and its partners".

Both Cronje and Haimbili shared CAFO's experiences and also learned many things from the symposium, like:

- New perspective on the role of capacity building in improving CSO service delivery
- CSO challenges with resource mobilization and inadequate capacity
- Documentation is key to promoting visibility of CSO to showcase improvement in service delivery for the beneficiaries
- Collaboration with other CSOs for mentoring and coaching as a capacity building strategy
- Regular organizational self-assessments facilitate addressing challenges in a timely manner

In implementing lessons learned from the symposium, CAFO updated its Facebook page and fact sheet, and shared its first e-newsletter with partners in December 2014, to improve the dissemination and visibility of its work.



CAFO Monitoring and Evaluation Officer, Ms. Emilia Haimbili, and Chief of Party, Ms. Laura Cronje, reviewing the CAFO fact sheet leaflet during the BLC Regional Symposium in Pretoria – South Africa, November 2014. Photo by Cherizaan Willemse

Through networking that began at the symposium, CAFO is currently learning from GROW, a CSO working with OVC in Lesotho. CAFO has also partnered with Child Line/Life Line, a CSO that promotes children's rights in Namibia, to attract funding from the Roger Federer Foundation. The three (3) year funding of US\$300,000 will support work in ECD centers.

Contributed by: Rachel Susan Basirika – BLC Country Lead and Cherizaan Willemse – BLC Project Associate

Lastly, CAFO held a staff forum in December, 2014 for their regional support officers to review progress, successes and challenges experienced since March 2014 when they began receiving technical assistance from BLC. BLC will continue enhancing capacity of CAFO to improve their service delivery to OVC in Namibia.

Assuring Safety of Antiretroviral Medicines Through Sentinel-based Pharmacovigilance in Namibia

The USAID-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) project in collaboration with the University of Washington provided technical assistance to the Therapeutics Information and Pharmacovigilance Centre (TIPC) of the Namibian Ministry of Health and Social Services (MoHSS) to assure the safety of patients on antiretroviral therapy (ART) through the close monitoring and management of adverse reactions to first-line antiretroviral (ARV) medicines.

When such monitoring is conducted at specific, selected sites instead of the entire country, the method is referred to as sentinel-based pharmacovigilance (active surveillance). This sentinel-based pharmacovigilance was conducted at the Katutura Intermediate and Windhoek

Central Hospitals. A total of 413 patients newly started on ART were included in the surveillance from August 2012 to April 2013, to better understand the safety of ARVs recommended for first-line use by the Namibian ART guidelines. Only 16% of the patients experience at least one adverse event, most of which were non-life threatening.

Building on the lessons learned from the two-site sentinel surveillance, SIAPS is supporting the TIPC to determine the overall feasibility of scaling up active surveillance in Namibia. Active surveillance is particularly essential for Namibia, which faces a dual burden of HIV and tuberculosis disease, with over 80% ART coverage.

Contributed by Greatjoy Njabulo Mazibuko (Senior Technical Advisor, SIAPS), Dr. Assegid Mengistu (TIPC Advisor, MoHSS) & Harriet R. Kagoya (Senior M&E Advisor, SIAPS)

Creating Medicines Inventory Management Champions to Support Decentralization of Antiretroviral Treatment Services in Namibia

The USAID-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) and the Supply Chain Management System (SCMS) projects provided technical assistance to the Ministry of Health and Social Services (MoHSS) in the training of trainers (ToT) to champion good inventory management in primary health care (PHC) facilities in Namibia.

Improving medicines inventory management at PHC facilities is a key activity of the MoHSS to support the decentralization of ART services, especially nurse initiated and managed ART (NIMART), for the benefit of the 14% of Namibian's total population living with HIV and AIDS. Twenty-two (22) pharmacists, pharmacist assistants and PHC supervisors from 12 of Namibia's 14 regions attended the training in November 2014 in Namibia. The champions will train and mentor nurses at PHC facilities in medicines inventory control and good storage practices for the effective and efficient management of life-saving ARVs, medicines for treating TB, malaria; and other related pharmaceuticals within the public sector health system.

The ToT was part of the collaboration with the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM), which provided the funding through the TB grant. The training is an intervention to address the challenges identified from the baseline assessment of the inventory control and storage practices at PHC facilities in the country. These include:

- Weak stock accountability
- Stock cards not being updated
- Non-adherence to defined maximum and minimum stock levels
- Limited control of access to the pharmacy storage areas
- Use of an outdated stock management manual.

The champions were equipped with knowledge and skills on adult learning, facilitation and evaluation of training. The highly participatory training included the use of visual aids, presentations, group discussions, group and individual exercises, short videos, question and answers, energizers, all the while tapping on participants' work experiences. SIAPS and SCMS will continue to liaise with the MoHSS and GFATM to support the 22 trained champions to implement the regional rollout plans developed after the training.



Ms. Maria Lucas from Khomas region facilitating a teach-back session during the inventory management training-of-trainers in Namibia in November 2014. Teach-back is an integrated approach to training that blends learning training skills with learning course content. Photo by MSH/Namibia Staff.

Implementation of the action plans is critical for effective and efficient management of ARVs and medicines for TB and other opportunistic infections to improve health service delivery and health outcomes for Namibia, which still faces a dual burden of HIV and AIDS and Tuberculosis.

At the end of the training, participants applied the knowledge and skills gained in a teach-back session, and developed rollout plans for improving inventory management in their regions.

Contributed by Bayobuya Phulu (Senior Technical Advisor, SIAPS), Alemayehu Wolde (Senior Technical Advisor, SCMS) and Harriet Rachel Kagoya (Senior M&E Advisor, SIAPS)

Namibia's National Health Training Center Develops a Manual for Sustaining the Quality of Pharmacy Assistants' Training

Pharmacy assistants (PAs) trained by the National Health Training Centre (NHTC) of the Ministry of Health and Social Services (MoHSS) contribute to improving the availability of local pharmaceutical personnel needed for providing essential pharmaceutical services in Namibia's public health sector, including the supply and dispensing of pharmaceuticals for the prevention, treatment and care of HIV/AIDS and tuberculosis.

As part of continued support to enhance the quality of training of pharmacy assistants (PAs) by the NHTC, the Systems for Improved Access to Pharmaceuticals and Services (SIAPS) supported the institution to standardize its Quality Management System (QMS) by developing a quality management manual. The NHTC will use the manual to assess and evaluate the quality of its training as part of the NHTC internal continuous quality improvement process.

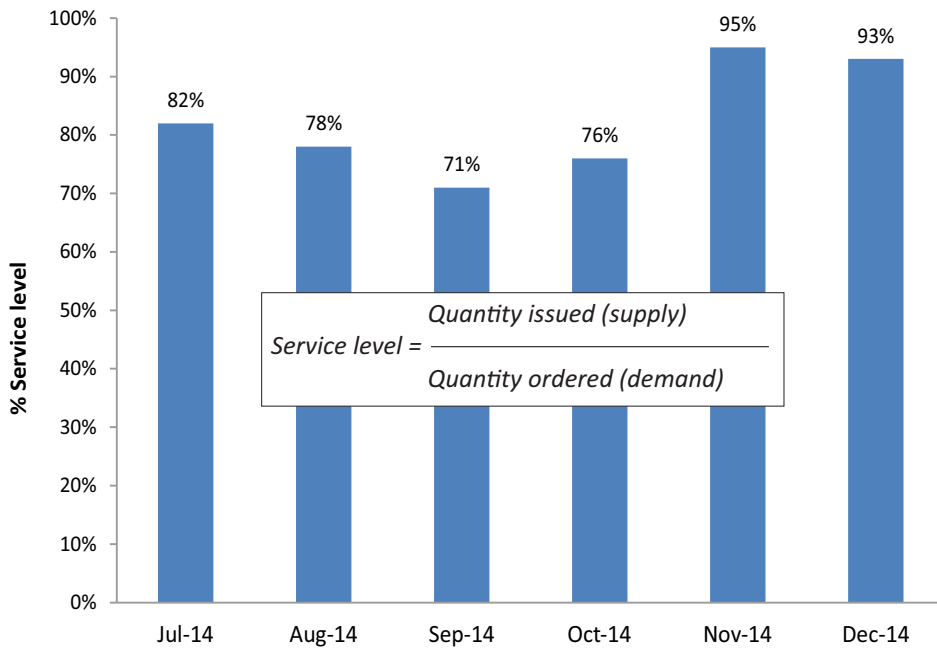
In addition to the QMS manual, SIAPS provided technical assistance to the NHTC to finalize a competency framework for pharmacy technicians, as well as standards and qualifications for PAs.

The competency framework was reviewed by the Health Professions Council of Namibia through the Pharmacy Council Executive Committee members. This assistance by SIAPS will facilitate NHTC's application for re-accreditation of the institution by the Namibia Qualifications Authority (NQA) and the Pharmacy Council/Health Professions Council of Namibia (HPCNa).

SIAPS technical assistance to the NHTC was made possible with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) through the U.S. Agency for International Development (USAID).

Contributed by Greatjoy Njabulo Mazibuko (Senior Technical Advisor, SIAPS) and Harriet Rachel Kagoya (Senior M&E Advisor, SIAPS)

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CMS was able to meet 95% of the demand for ARVs by ART sites in November 2014 following the contribution of SCMS in coordinating the procurement and delivery of an emergency order for six first line ARVs.

The USAID-funded Supply Chain Management System (SCMS) project contributed to the achievement of 95 percent order fulfilment rate for antiretroviral medicines (ARVs) by the Central Medical Store (CMS) in November 2014.

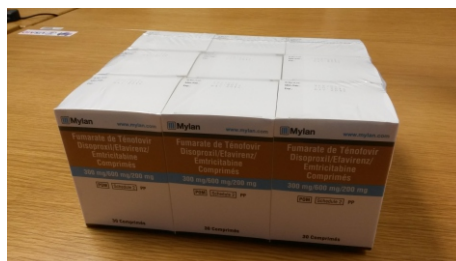
The CMS service level for ARVs had plummeted to a low of 71 percent in November 2014 following a year-long delay in processing of tenders and the dismal on-time delivery performance by suppliers contracted on short-term basis to fill the gap.

The improved availability of ARVs was attained after SCMS completed the delivery of an emergency order of six line items in October 2014, supplementing similar deliveries by CMS-contracted suppliers who had been awarded tenders in August 2014. SCMS facilitated the emergency procurement by coordinating communication between the Ministry of Health and Social Services (MoHSS) and its partners: the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and PEPFAR (through USAID).

This enabled speedy mobilization of funding from the PEPFAR emergency

commodity fund (ECF) that was later reimbursed by GFATM. The intensified procurement effort also enabled CMS to build-up stocks of the triple-fixed-dose-combination (FDC) of Tenofovir, emtricitabine and efavirenz tablets which is now the recommended first line antiretroviral treatment (ART) regimen in Namibia.

Adults newly eligible for ART and the majority of the over 120,000 adult patients currently on ART will begin transitioning to this new FDC in January 2015 and therefore benefit from a convenient one-pill-a-day dosing that is expected to improve adherence to treatment.



A sample of nine packs of the fixed-dose-combination antiretroviral medicine comprising Tenofovir, emtricitabine and efavirenz that was collected from CMS immediately after delivery by SCMS for quality control testing. Picture by MSH/Namibia staff

Compiled by Benjamin Onger, SCMS Senior Technical Manager

CMS's annual procurement expenditure was about N\$ 500 million in the financial year ending March 2013, with purchases of anti-retroviral (ARV) medicines and HIV rapid test kits contributing to about 40 percent of this expenditure.

By learning and adopting some of the private sector logistics best practices, CMS will be better able to cope with the current pressure on the warehousing and distribution infrastructure so as to meet the ever-growing customer expectations.

The SCPI program is geared towards supply chain performance improvement. Therefore, a set of key performance indicators (KPIs) were selected for monitoring. SCMS will support CMS to undertake a follow up self-audit in a within the next six months to measure the level of implementation of SOPs and the trends observed on KPIs.

Speaking during the de-briefing session at the end of the training, Dr. Norbert Forster, the Ministry of Health and Social Services Deputy Permanent Secretary acknowledged the challenges faced by CMS and the impact this was having on service delivery.

He commended the facilitators and urged the CMS management team to pick-up from where the trainers had stopped so as to sustain the behavioural competencies acquired and the change in staff attitudes stimulated by the training.



CMS staff engage in an organizational self-evaluation group work session during the SCPI training. Picture by MSH staff.

Compiled by Benjamin Onger, SCMS Senior Technical Manager

Utilizing Dispensing Data in Making Decisions on Improving the Quality of Service Delivery at Antiretroviral Therapy Sites in Namibia

The Namibian Ministry of Health and Social Services (MoHSS), in December 2014, conducted an assessment of the quality of services offered at selected antiretroviral therapy (ART) sites in the country where the HIV epidemic is still high.

The Ministry (MoHSS) and several PEPFAR implementing partners, including the USAID-funded SIAPS program participated in the site-level assessment. This ART Service Quality Assessment (SQA) was based on information on Early Warning Indicators (EWIs) of HIV drug resistance (HIV-DR) which the MoHSS Division of Pharmaceutical Services routinely collects, with technical assistance from SIAPS.

The data is captured and reported using the Electronic Dispensing Tool (EDT), which is a real-time pharmacy dispensing tool deployed in all the main ART sites in Namibia. The SQA was conducted as part of the recommendations of the 2014 HIV Drug Resistance Early warning indicators (HIV-DR EWI) report, produced by the MoHSS with support from SIAPS and Tufts University.

The 2014 HIV-DR EWI report was based on EWI data for the 2012 calendar year for all 50 main ART sites.

Namibia monitors the following five EWIs:

- On-time pill pick-up
- Retention in care
- Pharmacy stock-out rate
- Dispensing practices
- Virological suppression at six months.

The SQA assessed site-level factors affecting the quality of service delivery of HIV treatment services basing on the national and PEPFAR program standards.

Key recommendations of the SQA include:

- The strengthening of collaborative efforts to optimize quality of service delivery
- Ensuring the quality of data used for program improvement
- Reporting and conducting expenditure analysis



MoHSS and partners who participated in the review of the ART service quality assessment tools in Ongwediva, Namibia on December 2, 2014. Photo credit: CDC Namibia staff.

- Building the capacity for the government and implementing partners in continuous quality improvement of ART services for the total control of the HIV epidemic.

SIAPS will continue collaborating with the MoHSS and its partners to ensure that the EDT readily provides quality ART data and that the data are used to inform the improvement of ART services at all sites in Namibia

Contributed by Bayobuya Phulu
(Senior Technical Advisor, SIAPS)



ABOUT THE NEWSLETTER

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- Strengthening Health Systems
- Capacity Building
- Human Resource Development

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Your contribution to this valuable communication medium would be highly appreciated and can be e-mailed to esagwa@msb.org

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