Enabling Proper Quantification of Essential Medicines

According to its detailed action plan, CPDS’s Commodity Security Committee (CSC) held the first training of trainers on the *Quantification Guidelines for Essential Medicine* in November 2014.

These 35 pharmacy officers will conduct future trainings on the guidelines to help “cascade” the training and knowledge nationwide. The first batch of training included 32 participants, and, in December 2014, CSC provided technical assistance to a team conducting the training course for 20 pharmacy officers from 16 central hospitals in Kabul.

Available in Dari and English, the *Quantification Guidelines for Essential Medicines*

Continued on p. 4.

Improved Coordination to Enhance Contraceptive Availability

In keeping with efforts to make pharmaceutical procurement and distribution more efficient, the CPDS technical coordinator recognized overlap between the Reproductive Health Commodities Security Coordination Committee (RHCS CC) and the Commodity Security Committee (CSC).

Upon direction from the deputy minister of health care provision services, CPDS and RHCS CC coordinators and RHCS CC members reviewed the terms of reference (TOR) for both groups and considered options for a single coordination mechanism. Subsequently, RHCS CC members proposed that the RHCS CC and CSC continue to work separately, and that CPDS begin to provide technical assistance to the RHCS CC.

During monthly meetings in July, August, and September 2014, the RHCS CC reviewed and finalized its TOR and provided an action plan for developing its strategic plan. In late December 2014, the RHCS CC presented its draft strategic plan to the deputy minister of health care provision services for her review and feedback.
Establishing Common Criteria for Monitoring Supplier Performance

After a one-day orientation in September 2014, eight trained data collectors used a tool developed by the CPDS Advisory Committee for Systems Strengthening (ACSS) to gather information from 34 stakeholder organizations about their experiences with pharmaceutical suppliers.

The resulting data are informing development of common performance criteria for pharmaceutical suppliers in Afghanistan.

Because objective information about suppliers can be difficult to obtain in Afghanistan, these criteria will help Ministry of Public Health (MoPH) stakeholders to monitor and manage supplier performance, and to make informed decisions about suppliers. The data will inform a system for prequalifying suppliers used by MoPH stakeholders.

Launching a New Pharmaceutical Logistic Information System

The CPDS Data and Information Committee (DIC) has developed and extensively tested a quarterly reporting form and user manual for Afghanistan’s Pharmaceutical Logistic Information System (PLIS) and finalized micro and macro indicators for PLIS data.

The DIC also rolled out the form and manual to all nongovernmental organizations (NGOs) implementing the country’s Basic Package of Health Services (BPHS) or Essential Package of Hospital Services (EPHS).

With the DIC-finalized feedback form and mechanism, reviewers can examine quarterly submissions from NGOs and help them improve the quality of data they provide.

For approval and to bolster support for the planned PLIS launch, DIC presented a final report on PLIS testing to the Ministry of Public Health (MoPH) executive board in December 2014. The DIC working group has prepared an action plan for launching the PLIS and developed training materials to use in building PLIS capacity among pharmacy officers working for implementing NGOs and Provincial Public Health Directorates (PPHDs).

The DIC working group also developed an options analysis and recommendations for PLIS database sustainability (namely the pros and cons of employing Microsoft’s Excel and Access products). The General Directorate of Pharmaceutical Affairs (GDPA) will continue to use Access for the database system of the NGO.

Data collectors participated in a one-day orientation to help ensure that they could gather accurate and consistent information about current pharmaceutical suppliers. Photo by SPS staff.
Technical Sessions Continue to Promote Knowledge Sharing

CPDS periodically hosts member-led technical sessions during joint committees meetings. These sessions are important opportunities for CPDS stakeholders to share their knowledge and experiences working in Afghanistan’s public pharmaceutical sector.

In March 2014, MERLIN led a technical session about their pharmaceutical procurement mechanism. The presentation explored roles and responsibilities of the international and local logistics departments responsible for MERLIN’s medicine procurement for Afghanistan, and the process of quantification upon which procurement depends.

Afghanistan’s National Tuberculosis Control Program (NTP) led a technical session in December 2014 on its management system for anti-tuberculosis medicines. The session included background about the NTP, information on the medicine management cycle, successes, challenges, lessons learned, and recommendations.

Public Sector Pharmaceutical Services Directory Released

The Advisory Committee for System Strengthening (ACSS) has transferred the Public Sector Pharmaceutical Services Directory (PSD) package to staff from the General Directorate of Pharmaceutical Affairs (GDPA) who are now responsible for maintenance and future updates (with CPDS technical support).

The PSD includes comprehensive information — such as location and types of services provided — from 43 organizations that provide public-sector pharmaceutical services in Afghanistan. With this information, the Ministry of Public Health (MoPH) can better coordinate pharmaceutical activities.

The transfer occurred in July 2014 after ACSS prepared a detailed handover package and conducted in-service training for two GDPA donation officers. The training included an introduction to PSD data collection tools, methods of completing PSD data collection tools, data cleaning, data entry, generating reports, and developing the PSD).

The GDPA-approved PSD (in Dari and English) is available for download from the MoPH website, and hard copy distribution began in August 2014.
Quantification, continued from p. 1.

Guidelines for Essential Medicine resulted from extensive research, review, and consensus building among pharmaceutical quantification stakeholders, the Ministry of Public Health (MoPH), and its General Directorate of Pharmaceutical Affairs (GDPA).

CPDS’s Advisory Committee for System Strengthening (ACSS) has developed and completed substantive reviews of a complementary document: Procurement Guidelines for Essential Medicine that is currently under review by international technical advisors from the USAID-funded Strengthening Pharmaceutical Systems (SPS) project.

Both sets of guidelines will help to minimize waste, duplication of efforts, and stock-outs; to concretize contin-

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**CPDS NEWS**

The CPDS has worked since 2010 to improve service delivery by convening stakeholders in Afghanistan’s public health system to harmonize pharmaceutical procurement and distribution activities and systems.

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